## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000805

Entity Name: MIAMI DADE COUNTY FOSTER & ADOPTIVE PARENT

ASSOCIATION, INC.

**Current Principal Place of Business:** 

2870 NW 208TH STREET MIAMI GARDENS, FL 33056

**Current Mailing Address:** 

2870 NW 208TH STREET MIAMI GARDENS, FL 33056

FEI Number: 65-0599428 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DAVIS, TRAVIS 1955 NW 47TH STREET MIAMI, FL 33142 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TRAVIS DAVIS 01/31/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CSEC Title PRES

Name JONES, JOANN Name DAVIS, TRAVIS

Address 2870 NW 208 ST Address 1955 NW 47TH STREET

City-State-Zip: MIAMI FL 33056 City-State-Zip: MIAMI FL 33142

Title VP Title EXECUTIVE DIRECTOR

Name JOHNSON, BARBARA Name JENKINS, SHAMELE EXEC, DIRECTOR

 Address
 10850 SW 220 STREET
 Address
 1271 N.W. 172 STREET

 City-State-Zip:
 MIAMI FL 33170
 City-State-Zip: MIAMI GARDENS FL 33169

Title T. Title PAL

Name RIVERS, ETHEL Name HUGHES, CYNTHIA

Address 2951 NW 174TH STREET Address 13721 VAN BUREN STREET

City-State-Zip: MIAMI GARDENS FL 33056 City-State-Zip: MIAMI FL 33176

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOANN JONES

Electronic Signature of Signing Officer/Director Detail

SECERTARY

01/31/2024

FILED Jan 31, 2024

**Secretary of State** 

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