

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000805

**Entity Name:** MIAMI DADE COUNTY FOSTER & ADOPTIVE PARENT ASSOCIATION, INC.

**FILED**  
**Mar 10, 2017**  
**Secretary of State**  
**CC4723362659**

**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:**

JENKINS, SHAMELE  
1271 NW 172ND STREET  
MIAMI GARDENS, FL 33169 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CSEC  
Name JONES, JOANN  
Address 2870 NW 208 ST  
City-State-Zip: MIAMI FL 33056

Title PRES  
Name JENKINS, SHAMELE  
Address 1271 NW 172ND STREET  
City-State-Zip: MIAMI GARDENS FL 33147

Title VP  
Name HARDEMON, WILLIE  
Address 20494 NW 13TH AVENUE  
City-State-Zip: MIAMI FL 33056

Title RS  
Name MARTE, JANERIS RS  
Address 2201 N.W. 192 TERR  
City-State-Zip: MIAMI GARDENS FL 33056

Title T  
Name RIVERS, ETHEL  
Address 2951 NW 174TH STREET  
City-State-Zip: MIAMI GARDENS FL 33056

Title PAL  
Name DAVIS, TRAVIS  
Address 1945 N. W. 47TH STREET  
City-State-Zip: MIAMI FL 33142

*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: SHAMELE JENKINS**

**PRESIDENT**

**03/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date