

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007486

FILED  
Apr 28, 2012  
Secretary of State

**Entity Name:** NEW JOURNEYS TRANSITIONAL HOME, INC.

**Current Principal Place of Business:**

3146 NW 45TH ST  
MIAMI, FL 33142 US

**New Principal Place of Business:**

**Current Mailing Address:**

332 NORTHEAST 54TH STREET  
APT 2  
MIAMI, FL 33137 US

**New Mailing Address:**

**FEI Number:** 56-2599477      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CUMMINGS-GRAYSON & CO., P.A.  
915 NORTHWEST 1ST AVENUE  
BAY 3A  
MIAMI, FL 33136 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** CEOF  
**Name:** BOSTON, QUENIKA  
**Address:** 4799 CHAFIN POINT CT  
**City-St-Zip:** SNELLVILLE, GA 30039 US

**Title:** ED  
**Name:** COLE, KATHY  
**Address:** 332 NORTHEAST 54TH STREET APT 2  
**City-St-Zip:** MIAMI, FL 33137 US

**Title:** P  
**Name:** WANDA PHIPPS, IMANI  
**Address:** 2096 SERVICE ROAD  
**City-St-Zip:** OPA LOCKA, FL 33054 US

**Title:** VP  
**Name:** JAMA, FARHAN  
**Address:** 1756 N. BAYSHORE DRIVE, APT 22E  
**City-St-Zip:** MIAMI, FL 33132 US

**Title:** T  
**Name:** WADE, MELISSA  
**Address:** 4799 CHAFIN POINT COURT SW  
**City-St-Zip:** SNELLVILLE, GA 30039 US

**Title:** S  
**Name:** RUSH, KIM  
**Address:** 6651 COW PEN ROAD, APT B101  
**City-St-Zip:** MIAMI LAKES, FL 33014 US

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: QUENIKA BOSTON

CEO

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date