2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N04000004078

Entity Name: JOURNEY IN LIFE RESOURCE CENTER, INC.

Current Principal Place of Business:

1740 N.W.109TH STREET
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

1740 N.W.109TH STREET
MIAMI, FL 33167

New Mailing Address:

FEI Number: 20-1102981 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STRINGER, TALIA SHA-NADI
1740 N.W.109TH STREET
MIAMI, FL 33167 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:	PCEO	( ) Delete
Name:	LACKINGS, SANDRA R	
Address:	1740 N.W.109TH STREET	
City-St-Zip:	MIAMI, FL 33167	
Title:	TD	( ) Delete
Name:	JONES, TERENCE	
Address:	3010 N.W. 96TH STREET	
City-St-Zip:	MIAMI, FL 33147	
Title:	SD	( ) Delete
Name:	MCMILLAN, MELODY	
Address:	1110 N.W. 47TH TERRACE	
City-St-Zip:	MIAMI, FL 33127	
Title:	EXVD	( ) Delete
Name:	BOWEN, ANDREA	
Address:	P.O. BOX 222365	
City-St-Zip:	WEST PALM BEACH, FL 33422	
Title:	D	( ) Delete
Name:	JOHNSON, CHARLOTTE HISTORI	
Address:	12801 N.W. 1ST AVENUE	
City-St-Zip:	MIAMI, FL 33168	
Title:	D	( ) Delete
Name:	WALKER, NAOMI	
Address:	7500 LADY BANK DR	
City-St-Zip:	CHARLOTTE, NC 28206	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SANDRA LACKINGS PRES 05/01/2009

Electronic Signature of Signing Officer or Director — Date