

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012932

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: A PLACE CALLED HOME, INC.

## Current Principal Place of Business:

82 NE 68 TERRACE  
MIAMI, FL 33138 US

## New Principal Place of Business:

99 NW 183 STREET  
SUITE 101  
MIAMI GARDENS, FL 33169 US

## Current Mailing Address:

PO BOX 370306  
MIAMI, FL 33137 US

## New Mailing Address:

FEI Number: 56-2548590      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

THE MAY FOUNDATION, INC.  
82 NE 68 TERRACE  
MIAMI, FL 33138 US

## Name and Address of New Registered Agent:

THE MAY FOUNDATION, INC.  
99 NW 183 STREET  
SUITE 101  
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: L. MAYS

03/10/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MAYS, LINDA J  
Address: PO BOX 370306  
City-St-Zip: MIAMI, FL 33137 US

Title: VP ( ) Delete  
Name: MAYS, TORY B  
Address: 82 NE 68 TERRACE  
City-St-Zip: MIAMI, FL 33138 US

Title: T ( ) Delete  
Name: ROSS, TERESSA  
Address: 82 NE 68 TERRACE  
City-St-Zip: MIAMI, FL 33138 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: MAYS, TORY B  
Address: PO BOX 370306  
City-St-Zip: MIAMI, FL 33137 US

Title: T (X) Change ( ) Addition  
Name: ROSS, TERESSA  
Address: PO BOX 370306  
City-St-Zip: MIAMI, FL 33137 US

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: L. MAYS

PRES

03/10/2009

Electronic Signature of Signing Officer or Director

Date