

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005301

FILED  
Feb 29, 2012  
Secretary of State

Entity Name: NEW DAY RECOVERY, CORP.

**Current Principal Place of Business:**

9552 N BELFORT CIRCLE, 104  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

9552 N BELFORT CIRCLE, 104  
TAMARAC, FL 33321

**New Mailing Address:**

FEI Number: 90-0491595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HAMPTON, TOMMIE L  
9552 N BELFORT CIRCLE, 104  
TAMARAC, FL 33321 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: SD  
Name: HAMPTON, SIERRA L  
Address: 6505 SANDPIPER DRIVE  
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: O  
Name: RUSH-ADAMS, BEA  
Address: 5628 BLANCHARD PLACE NE  
City-St-Zip: SUGARHILL, GA 30518 US

Title: T  
Name: WOODWARD, MICHAEL  
Address: 1721 NE 42ND ST  
City-St-Zip: OAKLAND PARK, FL 33334 US

Title: O  
Name: APARICIO, RAUL DR.  
Address: 499 NW 70TH AVE STE 210  
City-St-Zip: PLANTATION, FL 33317 US

Title: P  
Name: HAMPTON, TOMMIE  
Address: 9552 N. BELFORT CIRCLE, #104  
City-St-Zip: TAMARAC, FL 33321

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: TOMMIE HAMPTON

P

02/29/2012

Electronic Signature of Signing Officer or Director

Date