

Chris Aquino

From: WMATC E-Filings
Sent: Friday, January 13, 2023 10:56 AM
To: WMATC carrier filings
Subject: 2023 Annual Report - WMATC No: 1354, Carrier Name: St. Johns Community Services (District of Columbia)

Washington Metropolitan Area Transit Commission 2023 Carrier Annual Report Form

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2023, must file a complete 2023 annual report and pay a \$175 annual fee on or before **January 31, 2023**. To be timely, the report and fee must be received at the WMATC office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (*) must be completed. If any information is missing or incorrect, make necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a \$150 late fee. Each carrier that fails to pay the \$175 annual fee on time will be assessed a separate **\$150 late fee..**
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2023.
- Filing an annual report containing false information, or omitting information, may result in a civil forfeiture.
- Make check or money order payable to WMATC. WMATC does not accept cash.

Read the accompanying instructions carefully before completing this form.

1. ANNUAL REPORT OF:

WMATC No.: 1354

Name of Carrier (as shown on certificate of authority): St. Johns Community Services (District of Columbia)

Trade Name:

Principal Place of Business

Street Address: 901 D St. SW

Apt./Suite: Suite 800

City: Washington

State: DC

Zip: 20024

Mailing Address (if different from street address)

Street: 901 D St. SW

Apt./Suite: Suite 800

City: Washington

State: DC

Zip: 20024

Telephone Number: 2028059131

Other Telephone:

Fax Number:

E-mail: hohiokpehai@sjcs.org

2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

USDOT No.:

DC DFHV No.:

Virginia DMV passenger carrier No.:

Maryland PSC No.:

3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Name: Hassan Ohiokpehai

Title: Property Manager

Telephone Number: 2028059131

Other Telephone:

Fax Number:

E-mail: hohiokpehai@sjcs.org

4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see www.wmatc.gov.

Name of Registered Agent for Service of Process:

Agent Address:

Apt./Suite:

City:

State:

Zip:

Telephone Number:

E-mail:

5. *CHANGES: Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

6. *LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS: (1) list your vehicles below or (2) upload a complete vehicle list to this form. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

Fleet No.	Year*	Make*	Vehicle VIN*	License Plate*	State*	Seating Cap.*	Wheel Chair
	2019	Dodge	2C4RDGBG4KR781211	B47147	DC	7	No
	2013	Dodge	2CRDGBGXDR563163	B47997	DC	7	No
	2014	Chevrolet	1GAWGRFG8E1197122	B45215	DC	8	No
	2016	Ford	1FDEE3FL2GDC18806	B49023	DC	9	Yes
	2016	Ford	1FMZK1YMXGKA01939	B48847	DC	8	No
	2016	Ford	1FMZK1YM8GKA01941	B48849	DC	8	No
	2016	Ford	1FMZK1YM6GKA01940	B48848	DC	8	No
	2018	Dodge	2C4RDGBG1JR138247	B45811	DC	7	No
	2018	Dodge	2C4RDGBG1JR138262	B45812	DC	7	No
	2018	Ford	1FTBW2CM6JKA26626	B48884	DC	8	Yes

***Your vehicle list was attached to your submission. *Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.**

7. *CERTIFICATION:

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

Name: Hassan Ohiokpehai

Title: Property Manager

Date: 01/13/2023