

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003332

**Entity Name:** GOOD SAMARITAN NETWORK, INC.**Current Principal Place of Business:**2706 N. MONROE STREET  
TALLAHASSEE, FL 32312**Current Mailing Address:**P. O. BOX 10547  
TALLAHASSEE, FL 32302 US**FEI Number:** 26-0263297**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WEST, ANNE  
1961 SETTING SUN TRAIL  
TALLAHASSEE, FL 32303 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:** ANNE WEST

02/13/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name DAVIS, STEVE  
Address P O BOX10547  
City-State-Zip: TALLAHASSEE FL 32302

Title CHAIRMAN  
Name SEWELL, SUZANNE  
Address P. O. BOX 10547  
City-State-Zip: TALLAHASSEE FL 32302

Title TREASURER  
Name PATTEN, KEVIN  
Address P. O. BOX 10547  
City-State-Zip: TALLAHASSEE FL 32302

Title SECRETARY  
Name WEST, ANNE  
Address P O BOX 10547  
City-State-Zip: TALLAHASSEE FL 32302

Title VC  
Name PENNEY, MICHAEL  
Address 2706 N. MONROE ST  
City-State-Zip: TALLAHASSEE, FL FL 32303

Title DIRECTIR  
Name DAVIS, CARL GLEN  
Address 2706 N. MONROE ST  
City-State-Zip: TALLAHASSEE, FL FL 32303

Title DIRECTOR  
Name METCALF, RICHARD (DICK)  
Address 2706 N. MONROE ST  
City-State-Zip: TALLAHASSEE, FL FL 32303

*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:** SUZANNE SEWELL**BOARD CHAIR**

02/13/2024

Electronic Signature of Signing Officer/Director Detail

Date