

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003082

Entity Name: GOOD SAMARITAN PHARMACY & HEALTH SERVICES, INC.

FILED
Feb 08, 2022
Secretary of State
2281919646CC

Current Principal Place of Business:

2502 TAMIAMI TRAIL NORTH
NOKOMIS, FL 34275

Current Mailing Address:

2502 TAMIAMI TRAIL NORTH
NOKOMIS, FL 34275 US

FEI Number: 26-2295558

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORCIER, GEORGE
2502 TAMIAMI TRAIL NORTH
NOKOMIS, FL 34275 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: GEORGE FORCIER

02/08/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GEORGE, FORCIER
Address 3603 N POINT RD, UNIT 802
City-State-Zip: OSPREY FL 34229

Title SEC
Name WILKINSON, JULIE
Address 2015 E 154TH STREET
City-State-Zip: BRADENTON FL 34212

Title MEDICAL DIRECTOR
Name MESGHALI, SHEEBA DR.
Address 243 PORTOFINO DRIVE
City-State-Zip: NORTH VENICE FL 34275

Title VP
Name PALACE, WILLIAM
Address 675 CRANE PRAIRIE WAY
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name CAMPBELL, MARCUS
Address 714 NE 147TH COURT
City-State-Zip: BRADENTON FL 34212

Title EXECUTIVE DIRECTOR
Name SERRANO, LULDES
Address 320 N. CATTLEMEN RD.
APT. 304
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name MAY, GAIL
Address 325 DOLPHIN SHORES
City-State-Zip: NOKOMIS FL 34275

Title DIRECTOR
Name HAAS, MATT
Address 5430 1ST AVE. APT. 302
City-State-Zip: BRADENTON FL 34208

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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: LULDES SERRANO

EXECUTIVE DIRECTOR

02/08/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name HITCHCOCK, KATHLEEN
Address 6433 BLUE GROSBEAK CIRCLE
City-State-Zip: BRADENTON FL 34202

Title DIRECTOR
Name SCOLARO, KELLY
Address 425 DARLING DR.
City-State-Zip: VENICE FL 34285