

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 03, 2016
Secretary of State
CC7137919347

Entity Name: SAMARITAN HEALTH AND WELLNESS CENTER, INC.

Current Principal Place of Business:

643 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

Current Mailing Address:

643 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904 US

FEI Number: 46-0922358

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOOK, SUSAN K
643 CAPE CORAL PARKWAY
CAPE CORAL, FL 33991 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name ROBERTS, NANCY
Address 3604 SW 14 PLACE
City-State-Zip: CAPE CORAL FL 33914

Title PRESIDENT
Name WILLIAMSON, ALICE
Address 2433 SW 29TH TERRACE
City-State-Zip: CAPR CORAL FL 33914

Title TREASURER
Name ERTTER, SHANNON
Address 1217 CAPE CORAL PKWY E #329
City-State-Zip: CAPE CORAL FL 33904

Title DIRECTOR
Name THERRELL, JAMES J JR
Address 4118 CORONADO PKWY
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR
Name HOOK, STEVEN C
Address 3415 OASIS BLVD
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR
Name OLSON, MADELYN DR
Address 1612 NW 9 ST
City-State-Zip: CAPE CORAL FL 33993

Title DIRECTOR
Name TOLMEN, HILLARY
Address 4638 SE 5TH PLACE
City-State-Zip: CAPE CORAL FL 33904

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: ALICE WILLIAMSON

PRESIDENT

03/03/2016

Electronic Signature of Signing Officer/Director Detail

Date