

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12644

FILED
Mar 19, 2020
Secretary of State
3254143338CC

Entity Name: GOOD SAMARITAN FUND AND SERVICES OF GREATER SUN CITY CENTER, INC.

Current Principal Place of Business:

1207 N PEBBLE BEACH BLVD.
SUN CITY CENTER, FL 33573

Current Mailing Address:

1207 N PEBBLE BEACH BLVD.
SUN CITY CENTER, FL 33573 US

FEI Number: 59-2615679

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLOYD, JULIE
1512 DEDHAM DR.
SUN CITY CENTER, FL 33573 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: JULIE FLOYD

03/19/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FLOYD, JULIE
Address 1512 DEDHAM DR.
City-State-Zip: SUN CITY CENTER FL 33573

Title VP
Name MAYOKA, JOHN
Address 1813 NEW BEDFORD DR.
City-State-Zip: SUN CITY CENTER FL 33573

Title TREASURER
Name VAN GELDER, CARRIE
Address 2417 EMERALD LAKE DR.
 APT. 109
City-State-Zip: SUN CITY CENTER FL 33573

Title SECRETARY
Name FRASER, BRUCE
Address 1506 DEDHAM DR.
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name CORBIN, LINDA
Address 2233 GREENHAVEN DR.
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name WEBER, ANN
Address 1714 FLAMINGO LN.
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name BROWN, HOWARD
Address 1903 W DEL WEBB BLVD.
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name DWYER, MERTON
Address 1903 CANTERBURY LANE
 B16
City-State-Zip: SUN CITY CENTER FL 33573

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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: JULIE FLOYD

PRESIDENT

03/19/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name POTTS, JACQUELINE
Address 2212 GREENHAVEN DR.
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name CRAMER, CHARLES
Address 228 LINGER LN.
City-State-Zip: SUN CITY CENTER FL 33573