

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000004112

Entity Name: SAMARITANS 365 FOUNDATION, INC.**Current Principal Place of Business:**20423 SR7
SUITE F6-268
BOCA RATON, FL 33498**Current Mailing Address:**20423 SR7
SUITE F6-268
BOCA RATON, FL 33498 US**FEI Number:** 46-5633031**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SAMARITANS365
20423 SR7
SUITE F6-268
BOCA RATON, FL 33498 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:** ANDREW REISS

02/03/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name REISS, LAURA
Address 11865 PRESERVATION LN
City-State-Zip: BOCA RATON FL 33498

Title TREASURER
Name REISS, ANDREW
Address 11865 PRESERVATION LANE
City-State-Zip: BOCA RATON FL 33498

Title DIRECTOR
Name COHEN, MELISSA ORLEN ESQ.
Address 11749 WATERCREST LN.
City-State-Zip: BOCA RATON FL 33498

Title SECRETARY
Name GERSTEIN, SANDRA TAUB
Address 19244 NATURES VIEW COURT
City-State-Zip: BOCA RATON FL 33498

Title DIRECTOR
Name FAERMAN, SUMMER SCHWARTZ
Address 1495 SW 13TH STREET
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR
Name HARMAN, ALLYSON
Address 9217 BOCA GARDENS CIR S
UNIT B
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR
Name STERN, MARA
Address 2813 BANYAN BLVD CIR NW
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name SIEGEL, JILL
Address 3785 COVENTRY LANE
City-State-Zip: BOCA RATON FL 33496

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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: LAURA REISS

PRESIDENT

02/03/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	RIOPELLE, LAURIE
Address	999 SW 4TH STREET
City-State-Zip:	BOCA RATON FL 33486