## 2022 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

Mar 04, 2022 Secretary of State 0250088792CC

**FILED** 

## **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 03/04/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitlePRESIDENTTitleTREASURERNameREISS, LAURANameREISS, ANDREW

Address 11865 PRESERVATION LN Address 11865 PRESERVATION LANE

City-State-Zip: BOCA RATON FL 33498

City-State-Zip: BOCA RATON FL 33498

Title DIRECTOR Title VP

Name COHEN, MELISSA ORLEN ESQ. Name GELLEN, KARIN

Address 11749 WATERCREST LN. Address 2430 NW 26TH CIRCLE

City-State-Zip: BOCA RATON FL 33498 City-State-Zip: BOCA RATON FL 33431

TitleDIRECTORTitleDIRECTORNameHARMAN, ALLYSONNameBALLA, DIDO

Address 9217 BOCA GARDENS CIR S Address 23358 SW 55TH AVE, UNIT A

UNIT B City-State-Zip: BOCA RATON FL 33433

City-State-Zip: BOCA RATON FL 33496

Title SECRETARY
Title DIRECTOR

Name RIOPELLE, LAURIE

Name SIEGEL, JILL

Address 8603 DREAM FALLS ST.

Address 8603 DREAM FALLS ST.

City-State-Zip: BOCA RATON FL 33486

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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: KARIN GELLEN EXECUTIVE DIRECTOR 03/04/2022

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameHIMMELRICH, SHELLYNameRUBIN, ROBIN MSWAddress1304 N. OCEAN BOULEVARDAddress17205 COURTLAND LNCity-State-Zip:DELRAY BEACH FL 33483City-State-Zip:BOCA RATON FL 33496