

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N9700000011

**Entity Name:** KISSIMMEE GOOD SAMARITAN SUNSHINE AUXILIARY, INC.

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC6821574696**

**Current Principal Place of Business:**

1500 SOUTHGATGE DRIVE  
KISSIMMEE, FL 34746

**Current Mailing Address:**

1500 SOUTHGATGE DRIVE  
KISSIMMEE, FL 34746

**FEI Number: 59-3277784**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LUKUCH, CHERYL ANNE  
1500 SOUTHGATE DRIVE  
KISSIMMEE, FL 34746 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: CHERYL ANNE LUKUCH**

**02/09/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title 1VP  
Name REED, ANNE  
Address 1492 ALDERSGATE #7  
City-State-Zip: KISSIMMEE FL 34746

Title SECRETARY  
Name VALENTINO, BARBARA  
Address 1500 SOUTHGATGE DRIVE  
City-State-Zip: KISSIMMEE FL 34746

Title TR  
Name BLEDSOE, LILLIAN  
Address 4135 SOUTHGATE  
City-State-Zip: KISSIMMEE FL 34746

Title AT  
Name LUND, JANICE  
Address 1605 LUTHER LANE  
City-State-Zip: KISSIMMEE FL 34746

*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: REED ,ANNE**

**1VP**

**02/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date