

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004692

Entity Name: SAMUEL'S HOUSE, INC.

Current Principal Place of Business:

1614 TRUESDELL CT
KEY WEST, FL 33040

Current Mailing Address:

1614 TRUESDELL CT
KEY WEST, FL 33040

FEI Number: 65-0951120

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STOVER, KIM EXECUTIVE DIRECTOR
1614 TRUESDELL CT
KEY WEST, FL 33040 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: KIM STOVER

01/13/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name TODARO , MARK
Address 1402 ALBERTA STREET
City-State-Zip: KEY WEST FL 33040

Title SECRETARY
Name CRISTY, SPOTTSWOOD
Address 13 KEY HAVEN TERRACE
City-State-Zip: KEY WEST FL 33040

Title BOARD MEMBER
Name BEAUBIEN, ALAN
Address 3841 N ROOSEVELT BLVD
City-State-Zip: KEY WEST FL 33040

Title VP
Name CATES, CHERYL
Address 3405 EAGLE AVENUE
City-State-Zip: KEY WEST FL 33040

Title TREASURER
Name STOKES, ERIKA
Address 629 EATON STREET
City-State-Zip: KEY WEST FL 33040

Title BOARD MEMBER
Name HALPERN, MICHAEL
Address 209 DUVAL STREET
 #2 FL D
City-State-Zip: KEY WEST FL 33040

Title BOARD MEMBER
Name HERBST, JACKIE
Address 908-A FRANCES STREET
City-State-Zip: KEY WEST FL 33040

Title BOARD MEMBER
Name THOMPSON, LAUREN
Address 725 WADDELL AVE, #7
City-State-Zip: KEY WEST FL 33040

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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: CHERYL CATES

VICE PRESIDENT

01/13/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOARD MEMBER
Name HENRIQUEZ, GABRIELLE
Address 1614 TRUESDELL CT
City-State-Zip: KEY WEST FL 33040

Title BOARD MEMBER
Name TROVATO, CAROL
Address PO BOX 1701
City-State-Zip: KEY WEST FL 33040

Title BOARD MEMBER
Name HUGHES, MAURA
Address 512 FRONT STREET
City-State-Zip: KEY WEST FL 33040

Title BOARD MEMBER
Name TROVATO, CHRISTINE
Address 2907 FOGARTY AVE
City-State-Zip: KEY WEST FL 33040