

FILED
May 22, 2003 8:00 am
Secretary of State

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04-14-2003 90056 023 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 710131			
1. Entity Name GOOD SAMARITAN CHURCH, INC. OF PINELLAS PARK, FL ORIDA			
Principal Place of Business 6085 PARK BLVD N. PINELLAS PARK FL 33781		Mailing Address 6085 PARK BLVD N. PINELLAS PARK FL 33781	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-1305272		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BROCKUS, HAROLD M. 6085 PARK BLVD., N PINELLAS PARK FL 33781		7. Name and Address of New Registered Agent Name Jean Scheufler Johnson Street Address (P.O. Box Number is Not Acceptable) 6085 Park Blvd. No. City Pinellas Park FL Zip Code 33781	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Jean Scheufler Johnson</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.) DATE			
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HALL, RICHARD 3565 EAGLES CROSSING DR CLEARWATER FL 33782 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Lewis, Tim 2700 29 St. No. St. Petersburg, FL 33713 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FRYMER, ALBERT E 1001 STARKEY ROAD 787 LARGO FL 33771 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JOHNSON, CHRISTOPHER 5689 62 WY NO ST PETERSBURG FL 33709 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Hall, Kate 2565 Eagles Crossing Dr. Clearwater, FL 33762 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 817, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Kate Hall</i>		3/30/03 (727) 572-9182	
SIGNATURE AND TYPED OR PRINTED NAME OF SHOWING OFFICER OR DIRECTOR		Date Daytime Phone #	

55042903



☐ CHECK HERE IF MAKING CHANGES

CP20037 (10/02)