

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715435

FILED
Apr 24, 2008
Secretary of State

Entity Name: SAMARITAN HOUSE FOR BOYS, INC.

Current Principal Place of Business:

1490 SE COVE RD
STUART, FL 349977504

New Principal Place of Business:

Current Mailing Address:

1490 SE COVE RD
STUART, FL 349977504

New Mailing Address:

FEI Number: 59-1373247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STOUPA, TERRY R
1490 SE COVE ROAD
STUART, FL 34997 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HAMPTON, LOUIS PRES.
Address: 6301 SE WINGLED FOOT DR
City-St-Zip: STUART, FL 34997

Title: D () Delete
Name: GENTHE, RICHARD
Address: 1399 SW SHORLINE DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: STOUPA, TERRY ED
Address: 1498 SE COVE RD
City-St-Zip: STUART, FL 34997

Title: D () Delete
Name: MOFFITT, JOHN
Address: 4449 SW QUIET PLACE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: METZGER, CHARLES S/T
Address: 2002 SW SANDHURST WAY
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: GESCHIEDLE, DANIEL
Address: 6484 SPYGLASS LANE
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HAMPTON, LOUIS PRES.
Address: 1701 SW CAPRI STREET
City-St-Zip: PALM CITY, FL 34990

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY R. STOUPA

ED

04/24/2008

Electronic Signature of Signing Officer or Director

Date