2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# 744809

Entity Name: THE GOOD SAMARITAN CHRISTIAN REFORMED CHURCH, INC.

Current Principal Place of Business:

4585 WEST FLAGLER STREET
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

4585 WEST FLAGLER STREET
MIAMI, FL 33134

New Mailing Address:

FEI Number: 31-0952748 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOLEDO, PEDRO
4585 W FLAGLER ST
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

PORTILLO, ORLY W
10395 NW 41 STREET
110
DORAL, FL 33178 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: ORLY WALTER PORTILLO 04/30/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: MORRIS, GLORIA
Address: 4585 W. FLAGLER STREET
City-St-Zip: MIAMI, FL 33134

Title: T ( ) Delete
Name: PEREZ, ARMANDO
Address: 4585 W. FLAGLER STREET
City-St-Zip: MIAMI, FL 33134

Title: P ( ) Delete
Name: TOLEDO, PEDRO
Address: 4585 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition
Name: CRESPO, TERESA
Address: 4585 W. FLAGLER STREET
City-St-Zip: MIAMI, FL 33134

Title: E (X) Change ( ) Addition
Name: FERNANDEZ, JAIME
Address: 10395 NW 41 STREET # 110
City-St-Zip: DORAL, FL 33178

Title: E (X) Change ( ) Addition
Name: PORTILLO, ORLY W
Address: 10395 NW 41 STREET # 110
City-St-Zip: DORAL, FL 33178

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: ORLY WALTER PORTILLO E 04/30/2008
Electronic Signature of Signing Officer or Director Date