2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000775

FILED Feb 26, 2012 Secretary of State

Entity Name: GOOD SAMARITAN VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4195 WALES STREET 4177 MURRAY CT KISSIMMEE, FL 34746 KISSIMMEE, FL 34746

Current Mailing Address: New Mailing Address:

P.O. BOX 663

INTERCESSION CITY, FL 33848

FEI Number: 59-3624799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COLLINS, LEE J 529 VERSAILLES DR. SUITE 103 MAITLAND, FL 32751 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: NEILSON, ELIZABETH S Address: 1577 MURRAY CT City-St-Zip: KISSIMMEE, FL 34746 UN

Title: VDVP

Name: CARDIELLO, BRUCE Address: 4187 CAMBRIDGE DRIVE City-St-Zip: KISSIMMEE, FL 34746

Title: TD

Name: BENNETT, DONNA
Address: 1641 CALVIN CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: SD

Name: CARDIELLO, BARBARA
Address: 4187 CAMBRIDGE DRIVE
City-St-Zip: KISSIMMEE, FL 34746

Title:

Name: COLLINS, GORDON
Address: 1565 PARKGATE DRIVE
City-St-Zip: KISSIMMEE, FL 34746

Title:

Name: DEMPSEY, JIM

Address: 3608 WONDERLAND PARK LAND

City-St-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: ELIZABETH NEILSON PD 02/26/2012