

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2007 8:00 am
Secretary of State

09-06-2007 90009 043 ****61.25

DOCUMENT # N01000007985

1. Entity Name
THE SAMARITAN CORPORATION, INCORPORATED



Principal Place of Business
9475 SE 35TH CT.
OCALA, FL 34480

Mailing Address
9475 SE 35TH CT.
OCALA, FL 34480



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08202007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number

01-0563999

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LECORN, BERNARD W
9475 SE 35TH CT
OCALA, FL 34480

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	LECORN, BERNARD	
STREET ADDRESS	9475 SE 35TH AVE.	
CITY-ST-ZIP	OCALA, FL 34480	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, ROBERT	
STREET ADDRESS	P.O. BOX 1229	
CITY-ST-ZIP	ALACHUA, FL 32616	
TITLE	D	<input type="checkbox"/> Delete
NAME	BELFREY, ALICIA	
STREET ADDRESS	6375 SE 28TH PL	
CITY-ST-ZIP	OCALA, FL 34471	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HOLLOWAY, ALVA	
STREET ADDRESS	547 SILVER CRS CIR	
CITY-ST-ZIP	OCALA, FL 34472	
TITLE	D	<input type="checkbox"/> Delete
NAME	BANFIELD, KELVIN	
STREET ADDRESS	1 CLEAR RUN	
CITY-ST-ZIP	OCALA, FL 34472	
TITLE	D	<input type="checkbox"/> Delete
NAME	DEJESUS, LUIS	
STREET ADDRESS	2901 SW 41 ST APT 2608	
CITY-ST-ZIP	OCALA, FL 34474	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Harold Damon	
STREET ADDRESS	3719 SE 73rd St	
CITY-ST-ZIP	OCALA, FL 34480	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/03/07 352-347-9407

Date

Daytime Phone #

ATTACHMENT
40131408

N01000007985

A

THE SAMARITAN CORPORATION, INCORPORATED
9475 SE 35TH CT.
OCALA FL 34480