## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000000471

FILED Apr 24, 2008 Secretary of State

Entity Name: GOOD SAMARITAN ALLIANCE CHURCH OF BOYNTON BEACH, INC.

3201 E. PA	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
BOYNTON	ALM DRIVE N BEACH, FL 33435			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
	ALM DRIVE N BEACH, FL 33435			
FEI Number	: FEI Number Applied For ( )	FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
706 SW 23 BOYNTON The above in the State	LBERTO F REV. 3 AVENUE N BEACH, FL 33435 US named entity submits this statement for the pue of Florida.	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE: Electronic Signature of Registered Ager	nt	 Date	
OFFICER	S AND DIRECTORS:		ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete TOUSSAINT, ZACHARIE REV. 3201 E. PALM DRIVE BOYNTON BEACH, FL 33435	Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle: Name:	SD ( ) Delete MIKED, ARISTIL MR. 3201 E. PALM DRIVE	Title: Name: Address:	() Change () Addition	
Address: City-St-Zip:	BOYNTON BEACH, FL 33435	City-St-Zip:		
	TD ( ) Delete RAYMOND, MARIE L MRS. 440 SW 6TH AVENUE BOYNTON BEACH, FL 33435	City-St-Zip: Title: Name: Address: City-St-Zip:	()Change ()Addition	
City-St-Zip: Fitle: Name: Address:	TD ( ) Delete RAYMOND, MARIE L MRS. 440 SW 6TH AVENUE	Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	

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: ZACHARIE TOUSSAINT REV. 04/24/2008