## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000005401

Title:

Name:

Address:

City-St-Zip:

FILED Apr 26, 2008 Secretary of State

Entity Name: SAMARITANS IN ACTION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1410 W. MICHIGAN STREET ORLANDO, FL 32805 **Current Mailing Address: New Mailing Address:** 1410 W. MICHIGAN STREET ORLANDO, FL 32805 FEI Number: 45-0523005 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: FREDERICK, LIONEL P 3202 MCEWÁN LANE ORLANDO, FL 32812 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FREDERICK, LIONEL P Name: Name: 3202 MCEWAN LANE Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ADELSON, MICHELINE Name: Address: 1210 W. MICHIGAN ST Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GRIFFIN, SHARON Name: LOPIDAS, ATELINA Name: 1837 FRUITWOOD COURT 1410 W. MICHIGAN STREET Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32805 Title: T/D ( ) Delete Title: () Change () Addition FRANCETTE, FREDERICK Name: Name: 3202 MCEWAN LANE Address: Address: City-St-Zip: ORLANDO, FL 32812 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LIONEL P. FREDERICK P/D 04/26/2008

() Delete

GILBERTE, PAUYO

1410 W. MICHIGAN ST

ORLANDO, FL 32805

() Change () Addition