

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006648

FILED
May 02, 2006
Secretary of State

Entity Name: SAMARITAN COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

1409 HOAG AVE
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

1409 HOAG AVE
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 01-0798020 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FIELDS, RONNIE
250 HAMMOCK RD S E
PALM BAY, FL 32909 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: P () Delete
Name: FIELDS, RONNIE
Address: 250 HAMMOCK RD S E
City-St-Zip: PALM BAY, FL 32909

Title: VP () Delete
Name: BROWN, THEOPHILUS
Address: 1190 RIVIERA RD S E
City-St-Zip: PALM BAY, FL 32905

Title: S () Delete
Name: FIELDS, DOREATHA J
Address: 250 HAMMOCK RD S E
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: BENJAMIN, EMON
Address: 159 GLADIOLA RD S E
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RONNIE FIELDS

P

05/02/2006

Electronic Signature of Signing Officer or Director

Date