

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007693

FILED
May 01, 2011
Secretary of State

Entity Name: GOOD SAMARITANS'S ACTION, INC.

Current Principal Place of Business:

135 LAINHART
SUITE 135
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

Current Mailing Address:

135 LAINHART
SUITE 135
WEST PALM BEACH, FL 33409 US

New Mailing Address:

FEI Number: 20-0215139 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NERETTE, HELENE V
135 LAINHART CT
SUITE 135
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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
Name: NERETTE, FRANTZ
Address: 135 LAINHART CT
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: S
Name: LAMY, JASLYNE
Address: 2150 NW 56TH AVE.
City-St-Zip: LAUDERHILL, FL 33313 US

Title: ADV
Name: KESNEL, EXANTUS
Address: 314 N.E 4TH STREET
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: M
Name: VANIE, VICTOR
Address: 89 N.W 109 STREET
City-St-Zip: MIAMI, FL 33161 US

Title: ADV
Name: ROUSSEAU, MONICA
Address: 1525 NW 167TH STE 300
City-St-Zip: MIAMI, FL 33169 US

Title: ADV
Name: CANTAVE, WINNIE
Address: 1525 NW 167TH STREET SUITE 300
City-St-Zip: MIAMI, FL 33169

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: FRANTZ NERETTE

P

05/01/2011

Electronic Signature of Signing Officer or Director

Date