

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004760

FILED  
Aug 09, 2010  
Secretary of State

**Entity Name:** GOOD SAMARITAN MISSIONARY INC.

**Current Principal Place of Business:**

1631 TUGWELL ST. SE  
PALM BAY, FL 32909

**New Principal Place of Business:**

**Current Mailing Address:**

1631 TUGWELL ST. SE  
PALM BAY, FL 32909

**New Mailing Address:**

**FEI Number:** 38-3802476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VICTOR, MARIE  
1631 TUGWELL ST. SE  
PALM BAY, FL 32909 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: PD  
Name: VICTOR, MARIE  
Address: 1631 TUGWELL ST. SE  
City-St-Zip: PALM BAY, FL 32909

Title: VD  
Name: VICTOR, MATERSON  
Address: 1631 TUGWELL ST. SE  
City-St-Zip: PALM BAY, FL 32909

Title: SD  
Name: PIERRE, MARIE K  
Address: 20 RED RIVER CT.  
City-St-Zip: COVINGTON, GA 30014

Title: TD  
Name: HARGROVE, WANDIE  
Address: 161 PERKINS AVE.  
City-St-Zip: BROCKTON, MA 02302

Title: AS  
Name: JAQUET, TAMARA  
Address: DELMAS 18 RUELLE ARCHIN #18  
City-St-Zip: PORT-AU-PRINCE, HAITI,

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: MARIE VICTOR

PD

08/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date