2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2012
Secretary of State

DOCUMENT# N10000006034

Entity Name: GOOD SAMARITAN SERVICES INC.

Current Principal Place of Business:

925 WEST PALM AVE
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

925 WEST PALM AVE.
JACKSONVILLE, FL 32254

New Mailing Address:

1586 MCCAUL ROAD
JACKSONVILLE, FL 32220

FEI Number: 27-5558550 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANGELO, ANTHONY D
925 WEST PALM AVE
JACKSONVILLE, FL 32254 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: ANGELO, ANTHONY D
Address: 925 WEAST PALM AVE
City-St-Zip: JACKSONVILLE, FL 32254

Title: VD
Name: MOORE, JOHN L JR.
Address: 1586 MCCAUL RD.
City-St-Zip: JACKSONVILLE, FL 32220

Title: TD
Name: MOORE, SANDRA J
Address: 1586 MCCAUL RD.
City-St-Zip: JACKSONVILLE, FL 32220

Title: D
Name: STARLING, DEAN
Address: 10282 NORMANWOOD CT.
City-St-Zip: JACKSONVILLE, FL 32221

Title: D
Name: WALKER, RUDY
Address: 45741 BISMARK ROAD
City-St-Zip: CALLAHAN, FL 32011

Title: D
Name: ASHLEY, CHRIS
Address: 4548 RIVER ROAD
City-St-Zip: HILLARD, FL 32046

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: TONY ANGELO P 01/29/2012

Electronic Signature of Signing Officer or Director — Date