2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Secretary of State DOCUMENT # N21278 01-27-2003 90353 035 ****61.25 GOOD SAMARITAN CHURCH OF THE BRETHREN, INC. Principal Place of Business Mailing Address 1317 PROUIDENCE ROAD 1317 PROUIDENCE ROAD **BRANDON FL 33511** BRANDON FL 33511 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-2845928 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ARMBUSTER, CHARLES Street Address (P.O. Box Number is Not Acceptable) 2514 FLETCHER AVE TAMPA FL 33618 Brandon 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 \Box Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Delete Change Addition TITLE TITI F HARRISON, JANET NAME NAME 1105 PARSONS AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRANDON FL** CITY-ST-7IP ☐ Delete TITLE Change Addition HARRISON, BYRON NAME NAME 1105 PARSONS AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRANDON FL** CITY-ST-ZIP Margaret Tabor A Change 3509 Whistle Stop Lane TITLE C TITLE Delete ARMBUSTER, CHARLES-NAME NAME 2514 FLETSHER AVE STREET ADDRESS STREET ADDRESS Valrico, Fl 33594 TAMPA FL 33618 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition SPEARS, RICHARD NAME NAME STREET ADDRESS 13210 LEWIS RAVLERSON RD STREET ADDRESS CITY-ST-ZIP DOVER FL 35527 CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Delete TITLE Change ☐ Addition NAME NAME

FILED

Jan 27, 2003 8:00 am

2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Suget & Hantson 11 Jone + E. Harrison 1/23/04 (8/3) 685-2559