2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007
Secretary of State

DOCUMENT# N49888

Entity Name: GOOD SAMARITAN CHRISTIAN FELLOWSHIP CHURCH, INC.

Current Principal Place of Business:

8250 LAIRD ROAD
BROOKSVILLE, FL 346017145

New Principal Place of Business:

Current Mailing Address:

8260 LAIRD ROAD
BROOKSVILLE, FL 346017145

New Mailing Address:

FEI Number: 59-3138166 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAURA, DOUGLAS SR.
8260 LAIRD ROAD
BROOKSVILLE, FL 346017145 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	( ) Delete
Name:	LEONARD, SR, JIMMIE	
Address:	5437 COLCHESTER AVENUE	
City-St-Zip:	SPRING HILL, FL 34608	
Title:	D	( ) Delete
Name:	MAURA, CLARENCE, JR.,	
Address:	25177 GONZALES MAURA LN	
City-St-Zip:	BROOKSVILLE, FL 34601	
Title:	D	( ) Delete
Name:	TAYLOR, GWEN	
Address:	741 SOUTH BAILEY ST.	
City-St-Zip:	BROOKSVILLE, FL 34601	
Title:	D	( ) Delete
Name:	SESLER, MARY FRANCES	
Address:	1076 PIERCEWOOD PT	
City-St-Zip:	BROOKSVILLE, FL 34602	
Title:	D	( ) Delete
Name:	MOBELY, MICHAEL	
Address:	12225 VILLA ROAD.	
City-St-Zip:	SPRING HILL, FL 34609	

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:	
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: JIMMIE L. LEONARD SR P 04/13/2007

Electronic Signature of Signing Officer or Director — Date