

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003957

FILED
May 30, 2008
Secretary of State

Entity Name: GOOD SAMARITAN CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1402 HEIMAN AVE
FT. MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 050094
FT, MYERS, FL 339050094

New Mailing Address:

FEI Number: 65-0474134 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KINCHEN, ANNIE L
1402 HEIMAN AVE.
FORT MYERS, FL 33905 US

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: E/PT () Delete
Name: KINCHEN, ANNIE L
Address: 1402 HEIMAN AVE
City-St-Zip: FT. MYERS, FL 33905

Title: ST () Delete
Name: FURLOW, MARY E
Address: 4746 NOTTINGHAM DR
City-St-Zip: FORT MYERS, FL 33905

Title: T () Delete
Name: FURLOW, ALTNASHA
Address: 4746 NOTTINGHAM DRIVE
City-St-Zip: FORT MYERS, FL 33905

Title: H () Delete
Name: SHAWN, KINCHEN T
Address: 1402 HEIMAN AVE
City-St-Zip: FORT MYERS, FL 33905

Title: D () Delete
Name: BLUE, HUBERT J
Address: 4738 NOTTINGHAM DRIVE
City-St-Zip: FT. MYERS, FL 33905

Title: H () Delete
Name: KINCHEN, JAMES T
Address: 1402 HEIMAN AVE
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: JOHNSON, MARY E
Address: 4746 NOTTINGHAM DR
City-St-Zip: FORT MYERS, FL 33905

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 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: EVANGELIST/ ANNIE L. KINCHEN

EVAN

05/30/2008

Electronic Signature of Signing Officer or Director

Date