2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2012
Secretary of State

DOCUMENT# N93000003957

Entity Name: GOOD SAMARITAN CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1402 HEIMAN AVE
FT. MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 050094
FT, MYERS, FL 33905 US

New Mailing Address:

FEI Number: 65-0474134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Title: ST
Name: JOHNSON, MARY E
Address: 4746 NOTTINGHAM DRIVE
City-St-Zip: FORT MYERS, FL 33905

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

Title: H
Name: DALTON, KINCHEN T
Address: 1402 HEIMAN AVE
City-St-Zip: FORT MYERS, FL 33905

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

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

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: EVANGELIST/OVERSEER E/OS 04/11/2012

Electronic Signature of Signing Officer or Director Date