

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004790

FILED
Jan 25, 2010
Secretary of State

Entity Name: THE GOOD SAMARITAN CHRISTIAN TEMPLE OF THE ASSEMBLIES OF GOD, INC.

Current Principal Place of Business:

2220 HUNTER ST
FT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

PO BOX 6503
FORT MYERS, FL 33991

New Mailing Address:

2220 HUNTER ST
FT MYERS, FL 33901

FEI Number: 65-0745602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUAREZ, ISRAEL REV
1745 EMERALD COVE CIR
CAPE CORAL, FL 33991 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
Name: SUAREZ, ISRAEL REV
Address: 1745 EMERALD COVE CIRCLE
City-St-Zip: CAPE CORAL, FL 33991 US

Title: S
Name: MELENDEZ, CARMEN M MRS.
Address: 2235 WILLIAMS DR
City-St-Zip: FORT MYERS, FL 33901 US

Title: DT
Name: COLON, LINDA E MRS.
Address: 11505 CLUMBET LANE
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: VP
Name: COLON, WILLIAM MR.
Address: 12024 COUNTRY DAY CIR.
City-St-Zip: FORT MYERS, FL 33913 US

Title: TR
Name: VAZQUEZ, ZORAIDA MRS.
Address: 811 ABRAMS STREET
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: T
Name: FONTANEZ, JOSE MR.
Address: 913 ADELINE AVE.
City-St-Zip: LEHIGH ACRES, FL 33971 US

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: ISRAEL SUAREZ

REV.

01/25/2010

Electronic Signature of Signing Officer or Director

Date