## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000011191

Entity Name: SAMARITAN'S HEALTH AND EDUCATIONAL PRACTICES, INC

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3544 COCO LAKE DR.

COCONUT CREEK, FL 33073 US

**Current Mailing Address: New Mailing Address:** 

3544 COCO LAKE DR.

COCONUT CREEK, FL 33073 US

FEI Number: 26-1858913 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEDINA-SHEPHERD, ROSARIO 7375 NW 52ND CT

LAUDERHILL, FL 33319 US MEDINA-SHEPHERD, ROSARIO 3544 COCO LAKE DŔIVE COCONUT CREEK, FL 33073 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: 04/27/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete

MEDINA-SHEPHERD, ROSARIO Name: 7375 NW 52ND CT

Address:

City-St-Zip: LAUDERHILL, FL 33319 US Title: (X) Change ( ) Addition

MEDINA-SHEPHERD, ROSARIO Name:

Address:

3544 COCO LAKE DR.

City-St-Zip: COCONUT CREEK, FL 33073 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSARIO MEDINA-SHEPHERD 04/27/2009 CEO