2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2014
Secretary of State
CC2197816062

DOCUMENT# 715435

Entity Name: SAMARITAN HOUSE FOR BOYS, INC.

Current Principal Place of Business:

1490 SE COVE RD
STUART, FL 34997-7504

Current Mailing Address:

1490 SE COVE RD
STUART, FL 34997-7504

FEI Number: 59-1373247

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHRISTENSEN, AMY
1490 SE COVE ROAD
STUART, FL 34997 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: AMY CHRISTENSEN 03/19/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN
Name	PORTER, DOUGLAS B
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	DIRECTOR
Name	ALEXANDER, DAVID
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	DIRECTOR
Name	MOORE, MURPHY
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	DIRECTOR
Name	MURPHY, WILLIAM
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	DIRECTOR
Name	ANDREWS, BOB
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	DIRECTOR
Name	TROTMAN, STANLEY
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	DIRECTOR
Name	KINANE, SUSAN
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	DIRECTOR
Name	WEBBER, GLENN
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

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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: AMY CHRISTENSEN EXECUTIVE DIRECTOR 03/19/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WHITCOMB, CAMILLE
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504

Title	EXECUTIVE DIRECTOR
Name	CHRISTENSEN, AMY
Address	1490 SE COVE RD
City-State-Zip:	STUART FL 34997-7504