

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010680

**Entity Name:** GOOD SAMARITAN CHURCH, INC.

**Current Principal Place of Business:**

3720 CAPITAL CIRCLE SE  
TALLAHASSEE, FL 32311

**Current Mailing Address:**

3720 CAPITAL CIRCLE SE  
TALLAHASSEE, FL 32311

**FEI Number: 26-1347544**

**Certificate of Status Desired: No**

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

COLE, TERRY  
301 S. BRONOUGH STREET  
SUITE 500  
TALLAHASSEE, FL 32301 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

**Officer/Director Detail :**

Title FINANCE CHAIR  
Name HORNING, SHANNON  
Address 1199 MARCH RD  
City-State-Zip: TALLAHASSEE FL 32311

Title TRUSTEES CHAIR  
Name WALSH, PATRICK  
Address 49 MALLARD POND CIR  
City-State-Zip: CRAWFORDVILLE FL 32327

Title PASTOR  
Name SHRADER, MICHELLE  
Address 1537 LEE AVE  
City-State-Zip: TALLAHASSEE FL 32303

Title COUNCIL CHAIR  
Name ONTKO, ELLEN  
Address 1355 WINDWOOD WAY  
City-State-Zip: TALLAHASSEE FL 32311

Title EXECUTIVE SECRETARY  
Name EDELSTEIN, MELISSA  
Address 524 SIEG LN  
City-State-Zip: BONIFAY FL 32425

Title CHURCH TREASURER  
Name HARRELL, PATRICIA  
Address 9402 BOYKIN RD  
City-State-Zip: TALLAHASSEE FL 32317

Title SPRC CHAIR  
Name STUBBS, JOY  
Address 9041 BUCK LAKE RD  
City-State-Zip: TALLAHASSEE FL 32317

*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: MELISSA EDELSTEIN**

**BUSINESS  
ADMINISTRATOR**

**02/01/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date