

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003903

Entity Name: SOUTH DAYTONA BEACH GOOD SAMARITAN HOUSING, INC.

FILED
Mar 17, 2014
Secretary of State
CC2042387613

Current Principal Place of Business:

4800 WEST 57TH STREET
SIOUX FALLS, SD 57108

Current Mailing Address:

4800 WEST 57TH STREET
SIOUX FALLS, SD 57108

FEI Number: 46-0461264

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 D
Name HOLT, JOHN F
Address 421 RIDGE ROAD
City-State-Zip: ALBERT LEA MN 56007

Title D
Name RACEK, JOHN
Address 11 SAINT ALBANS ROAD EAST
City-State-Zip: HOPKINS MN 55305

Title P
Name HORAZDOVSKY, DAVID J
Address 4800 WEST 57TH STREET
City-State-Zip: SIOUX FALLS SD 57117

Title VPST
Name NYLANDER, RAYE NAE
Address 4800 WEST 57TH STREET
City-State-Zip: SIOUX FALLS SD 57117

Title D
Name ELWIN, BROWN L
Address 14626 SOUTHWEST, 112 CIRCLE
City-State-Zip: DUNNELLON FL 34432

Title D
Name NEIL, GULSVIG L
Address 2306 EAGLE VALLEY LANE
City-State-Zip: WAUSAU WI 54403

Title DIRECTOR
Name CHRISTOPHER, JOHNSON
Address 12880 53RD STREET NORTH
City-State-Zip: STILLWATER MN 55082

Title DIRECTOR
Name HALAAS, GWEN DR.
Address 3549 IVY DRIVE
City-State-Zip: GRAND FORKS ND 58201

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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: MISTY HAM-QUICK

ASSISTANT SECRETARY 03/17/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MATSON, GUY
Address 925 STAGECOACH DRIVE
City-State-Zip: LAS CRUCES NM 88011

Title DIRECTOR
Name SHARON, ST MARY
Address 2726 MACKUBIN STREET;
City-State-Zip: ROSEVILLE MN 55113

Title DIRECTOR
Name SAMUELSON, PHILIP
Address 47307 ROGNESS PLACE
City-State-Zip: RENNER SD 57055

Title ASST. SECRETARY
Name MISTY, HAM-QUICK
Address 4800 W 57TH ST
City-State-Zip: SIOUX FALLS SD 57108