2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27206

FILED Apr 24, 2007 Secretary of State

Entity Name: BETA PSI CORPORATION OF PHI SIGMA SIGMA, INC.

Name and Address of Current Registered Agent: JONES, CHANDLER, JR. 2531 N W 41 STREET SUITE E GAINESVILLE, FL 32606 US The above named entity submits this statement for the purpose of changing its registered office of in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO O Title: DS () Delete Name: DISTLER, JUDITH Name: Address: City-St-Zip: SPRINGFIELD, VA City-St-Zip: Title: DP () Delete Title: () Chang Name: Address: City-St-Zip: Title: () Chang Name: Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: GAINESVILLE, FL	
2631 NW 41ST STREET, BLDG. E GAINESVILLE, FL 32606 Current Mailing Address: C/O CHANDLER JONES 2531 NW 41ST STREET, BLDG. E GAINESVILLE, FL 32606 FEI Number: 59-2912280 FEI Number Applied For () Name and Address of Current Registered Agent: Name and Address of New R JONES, CHANDLER, JR. 2531 NW 41 STREET SUITE E GAINESVILLE, FL 32606 US The above named entity submits this statement for the purpose of changing its registered office o in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO O Title: DS () Delete Name: DISTLER, JUDITH Address: City-St-Zip: SPRINGFIELD, VA City-St-Zip: Title: DP () Delete Name: SMITH, ELLEN Name: SMITH, ELLEN Name: SMITH, ELLEN Name: SMITH, ELLEN Name: City-St-Zip: GAINESVILLE, FL City-St-Zip: Title: DT () Delete Name: Address: City-St-Zip: Title: D () Delete Title: () Chang Name: Address: City-St-Zip: Title: D () Delete Title: () Chang Name: Address: City-St-Zip: Title: D () Delete Title: () Chang Name: Address: City-St-Zip: Title: D () Delete Title: () Chang Name: Address: City-St-Zip: Title: D () Delete Title: () Chang Name: Address: City-St-Zip: Title: D () Delete Title: () Chang Name: Address: City-St-Zip: Title: () Chang Name: City-St-Zip: Title: () Chang N	ness:
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Address: 23123 STATE RD 7 #250 Address: City-St-Zip: BOCA RATON, FL City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELLEN SMITH PRES 04/24/2007