

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27206

FILED  
May 09, 2011  
Secretary of State

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

**Current Principal Place of Business:**

C/O CHANDLER JONES  
2531 NW 41ST STREET, BLDG. E  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CHANDLER JONES  
2531 NW 41ST STREET, BLDG. E  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 59-2912280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JONES, CHANDLER, JR.  
2531 N W 41 STREET  
SUITE E  
GAINESVILLE, FL 32606 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DS  
Name: DISTLER, JUDITH  
Address: 4503 HEREND PLACE  
City-St-Zip: FAIRFAX, VA 22032

Title: DP  
Name: SMITH, ELLEN  
Address: 4727 N.W. 124TH ST.  
City-St-Zip: GAINESVILLE, FL

Title: DT  
Name: GEORGE, JOSETTE  
Address: 2502 N. DIXIE HIGHWAY  
City-St-Zip: LAKE WORTH, FL 33460

Title: D  
Name: MACEY, DIANNE  
Address: 23123 STATE RD 7 #250  
City-St-Zip: BOCA RATON, FL

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: ELLEN SMITH

PRES

05/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date