

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 768182

**Entity Name:** OMICRON BETA BETA CHAPTER OF OMEGA PSI PHI FRATERNITY, INC.

**Current Principal Place of Business:**

2746 BLAKE ST.  
FT MYERS, FL 33916

**Current Mailing Address:**

P.O. BOX 2855  
FT MYERS, FL 33902

**FEI Number: 65-0138836**

**Certificate of Status Desired: No**

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

BRYSON, EMMIT J  
706 EDISON AVE  
LEHIGH ACRES, FL 33972 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            PRESIDENT  
Name            GIBBONS, JOHN L  
Address        731 LONG DISTANCE LANE  
                  POST OFFICE BOX 1298  
City-State-Zip: LEHIGH ACRES FL 33970

Title            SECRETARY  
Name            WILLIAMS, COREY  
Address        7247 ALBANY ROAD  
City-State-Zip: FORT MYERS FL 33967

Title            VP  
Name            WALKER, FORREST JR.  
Address        POST OFFICE BOX 1694  
City-State-Zip: FORT MYERS FL 33902

Title            TREASURER  
Name            DAVIS, ASHTON  
Address        2712 SE 8TH AVENUE  
City-State-Zip: CAPE CORAL 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: JOHN L. GIBBONS**

**PRESIDENT**

**04/25/2013**

Electronic Signature of Signing Officer/Director Detail

Date