

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000418

Entity Name: CHI PHI ZETA CHAPTER OF ZETA PHI BETA SORORITY, INC.**Current Principal Place of Business:**2575 S US HWY 17-92
SUITE 139
CASSELBERRY, FL 32707**Current Mailing Address:**2575 S US HWY 17-92
SUITE 139
CASSELBERRY, FL 32707 US**FEI Number: 27-1633700****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PICKETT, ROSA
2785 BLUE RAVEN CT.
LAKE MARY, FL 32746 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 P
Name SUTTON , DERIETH
Address 216 LORI COURT
City-State-Zip: UMATILLA FL 32784-7605Title TG
Name WILLIAMSON-WRIGHT, ROSA
Address 1991PARKGLEN CIRCLE
City-State-Zip: APOPKA FL 32712Title VP
Name CROSS, TIFFENY
Address 567 HERNANDO PLACE
City-State-Zip: CLERMONT FL 34715Title S
Name TURNER, KIEANNA
Address 2908 STONEGATE DRIVE
City-State-Zip: OCOEE FL 34761Title T
Name TAYLOR, SHERYL
Address 1903 PALMVIEW DRIVE
City-State-Zip: APOPKA FL 32712

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: SHERYL TAYLOR**TAMAS****03/14/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date