## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000009109

Entity Name: GAMMA PHI DELTA SORORITY DELTA DELTA CHAPTER, INC

FILED
Mar 15, 2014
Secretary of State
CC9277283815

## **Current Principal Place of Business:**

2415 NORTH RIVERSIDE DRIVE TAMPA. FL 33602

## **Current Mailing Address:**

2415 NORTH RIVERSIDE DRIVE TAMPA, FL 33602

FEI Number: 90-1015482 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LOVETT, FOSTER 400 EAST MLK BLVD. SUITE #108 TAMPA, FL 33603 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 Title VP

Name ROBERTS, PAMELA Name ANTHONY, YOLANDA

Address 3217 E. FERN STREET Address 2415 NORTH RIVERSIDE DRIVE

City-State-Zip: TAMPA FL 33610 City-State-Zip: TAMPA FL 33602

Title T Title 5

Name WILLIAMS, JOHNNIE Name REED, MARY

Address POST OFFICE BOX 4049 Address 2415 NORTH RIVERSIDE DRIVE

City-State-Zip: TAMPA FL 33509 City-State-Zip: TAMPA FL 33602

Title E

Name OLIVER, LATASHA

Address 2415 NORTH RIVERSIDE DRIVE

City-State-Zip: TAMPA FL 33602

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: YOLANDA Y. ANTHONY

FINANCIAL SECRETARY

03/15/2014