

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000003135

**Entity Name:** SEU OMEGA CHI INC.

**Current Principal Place of Business:**

1000 LONGFELLOW BLVD  
NATURAL HEALTH AND SCIENCE BLD  
LAKELAND, FL 33801

**Current Mailing Address:**

1000 LONGFELLOW BLVD  
NATURAL HEALTH AND SCIENCE BLD  
LAKELAND, FL 33801

**FEI Number:** 38-4138273

**Certificate of Status Desired:** No

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

POMELLA, LAURIE A  
8040 PARK BYRD RD  
LAKELAND, FL 33810 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	T
Name	POMELLA, LAURIE A	Name	ACEVEDO, KIMBERLY L
Address	8040 PARK BYRD RD.	Address	127 BRANDY CHASE BLVD
City-State-Zip:	LAKELAND FL 33810	City-State-Zip:	WINTER HAVEN FL 33880
Title	D		
Name	TASKER-WEAVER, SUSIE		
Address	2867 KINSLEY DR.		
City-State-Zip:	LAKELAND FL 33812		

*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:** KIMBERLY ACEVEDO

**TREASURER**

**04/14/2021**

Electronic Signature of Signing Officer/Director Detail

Date