

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27206

**FILED**  
**Jan 15, 2014**  
**Secretary of State**  
**CC9197795536**

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

**Current Principal Place of Business:**

C/O JEFFREY R. LAMB  
2531 NW 41ST STREET, BLDG. A  
GAINESVILLE, FL 32606

**Current Mailing Address:**

C/O JEFFREY R. LAMB  
2531 NW 41ST STREET, BLDG. A  
GAINESVILLE, FL 32606 US

**FEI Number:** 59-2912280

**Certificate of Status Desired:** No

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

LAMB, JEFFREY R  
2531 N W 41 STREET  
SUITE A  
GAINESVILLE, FL 32606 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:** JEFFREY R. LAMB

01/15/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DS	Title	DP
Name	DISTLER, JUDITH	Name	SMITH, ELLEN
Address	4503 HEREND PLACE	Address	4727 N.W. 124TH ST.
City-State-Zip:	FAIRFAX VA 22032	City-State-Zip:	GAINESVILLE FL
Title	DT		
Name	SYLVESTER, MELISSA		
Address	234 WOODBRIDGE DRIVE		
City-State-Zip:	ATLANTA GA 30339		

*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

**PRESIDENT**

01/15/2014

Electronic Signature of Signing Officer/Director Detail

Date