

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jun 08, 2020
Secretary of State
1244672958CC

Entity Name: DELTA LAMBDA SIGMA CHAPTER OF PHI BETA SIGMA, FRATERNITY, INC.

Current Principal Place of Business:

9304 NATURE'S WAY
FORT PIERCE, FL 34945

Current Mailing Address:

PO BOX 1881
FORT PIERCE, FL 34954 US

FEI Number: 31-1689823

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURNS, SIMMIE W
9304 NATURE'S WAY
FORT PIERCE, FL 34945 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 SECRETARY
Name MIGHTY, HENRY
Address 1762 SW JANETTE AVE.
City-State-Zip: PT. ST. LUCIE FL 34953

Title 2ND VP
Name MCCORRISON, ROBERT M.
Address 9304 NATURE'S WAY
City-State-Zip: FORT PIERCE FL 34945

Title TREASURER, DIRECTOR
Name BURNS, SIMMIE W
Address 9304 NATURE'S WAY
City-State-Zip: FORT PIERCE FL 34945

Title DIRECTOR
Name GRAHAM, PAUL DR.
Address 5800 BENT PINE DRIVE
City-State-Zip: VERO BEACH FL 32967

Title PRESIDENT, DIRECTOR
Name WATKINS, FRANK L. JR.
Address 2090 4TH AVENUE SW
City-State-Zip: VERO BEACH FL 32962

Title 1ST VP
Name WILSON, CLIFTON
Address 577 SE NOME DRIVE
City-State-Zip: PT. ST. LUCIE FL 34984

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: SIMMIE W. BURNS

TREASURER

06/08/2020

Electronic Signature of Signing Officer/Director Detail

Date