

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702350

FILED
Jan 04, 2010
Secretary of State

Entity Name: GAMMA RHO OMEGA CHAPTER, INC. OF ALPHA KAPPA ALPHA SORORITY

Current Principal Place of Business:

1011 W. 8TH STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

1011 W. 8TH STREET
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 36-2152330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EALEY, SHIRLEY
12688 SAMPSON RD
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: ATWATER, BONNIE C
Address: 8023 CREEDMOOR DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP
Name: BROWN, MARY L
Address: 1553 LEEWORTH LN
City-St-Zip: JACKSONVILLE, FL 32221

Title: SD
Name: FOWLER, KIMBERLY
Address: 8032 CONCORD CIRCLE
City-St-Zip: JACKSONVILLE, FL 32208

Title: TD
Name: EALEY, SHIRLEY T
Address: 12688 SAMPSON RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: FD
Name: BROWN, SAUNDRA
Address: 5246 LOCKSLEY AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: BM
Name: RICHIE, WILLETTA
Address: 4442 MANDARIN RIDGE COURT
City-St-Zip: JACKSONVILLE, FL 32258

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: SHIRLEY T. EALEY

TD

01/04/2010

Electronic Signature of Signing Officer or Director

Date