

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749215

FILED
Apr 20, 2011
Secretary of State

Entity Name: FLORIDA STATEWIDE ORGANIZATION OF OMEGA PSI PHI FRATERNITY, INC.

Current Principal Place of Business:

P. O. BOX 623
WILDWOOD, FL 34785

New Principal Place of Business:

1053 S.W. 146TH TERRACE
PEMBROKE PINES, FL 33027

Current Mailing Address:

P. O. BOX 623
WILDWOOD, FL 34785

New Mailing Address:

1053 S.W. 146TH TERRACE
PEMBROKE PINES, FL 33027

FEI Number: 27-0068133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROCKER, RODNEY E SR.
4940 CR 121D.
WILDWOOD, FL 34785 US

Name and Address of New Registered Agent:

BEASLEY, RODERICK E
1053 S.W. 146TH TERRACE
PEMBROKE PINES, FL 33027 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: RODERICK E. BEASLEY

04/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: JOHNSON, DARYL A
Address: 2160 NW 32ND TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: VP
Name: ROCKER, RODNEY E SR
Address: P. O. BOX 623
City-St-Zip: WILDWOOD, FL 34785

Title: S
Name: FAIR, CHESTER JR
Address: P. O. BOX 161157
City-St-Zip: MIAMI, FL 33116

Title: T
Name: BEASLEY, RODERICK E
Address: 1053 SW 146TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33027

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: RODERICK E. BEASLEY

T

04/20/2011

Electronic Signature of Signing Officer or Director

Date