FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 749270 (5)

1. Corporation Name

GAMMA THETA OMEGA, INCORPORATED

Principal Place of Business	Mailing Address
412 E 7TH AVE TAMPA FL 33602 US	P. O. BOX 1246 TAMPA FL 33601

3. Date Incorporated or Qualified: 10/10/1979

4. FEI Number: 59-2072596 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~WIGGINS, BETTY P~~ ~~3708 E. MCBERRY STREET~~ ~~TAMPA FL 33610~~	MYERS, GWENDOLYN W. 2704 N. 32nd STREET TAMPA, FL. 33605

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Gwendolyn W. Myers DATE: May 28, 1998
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~PD~~	☒ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	~~BROWN, MARSHA~~		1.2 NAME	BENTON, THELMA D.	
STREET ADDRESS	~~6508 NORCHESTER CIRCLE~~		1.3 STREET ADDRESS	18421 BITTERN AVE.	
CITY-ST-ZIP	~~TAMPA FL 33647~~		1.4 CITY-ST-ZIP	LUTZ, FL. 33549	
TITLE	~~VP~~	☒ DELETE	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	~~SOLOMON, TEMPRESS~~		2.2 NAME	BELL, ELEANOR J.	
STREET ADDRESS	~~10005 N. 29TH STREET~~		2.3 STREET ADDRESS	P.O. BOX 151204 3011 E. Flora Street	
CITY-ST-ZIP	~~TAMPA FL 33612~~		2.4 CITY-ST-ZIP	TAMPA, FL. 33684-1204 Tampa, FL 33610	
TITLE	VD	☒ DELETE	3.1 TITLE	VD	☒ Change ☐ Addition
NAME	MYERS, GWENDOLYN W		3.2 NAME	CASON, DONNA	
STREET ADDRESS	2704 N. 32ND STREET		3.3 STREET ADDRESS	6408 THOROUGHBRED LOOP	
CITY-ST-ZIP	TAMPA FL 33605		3.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	CARTER, IVA		4.2 NAME		
STREET ADDRESS	5102 19TH STREET		4.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33610		4.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	WATLEY, THERESA		5.2 NAME		
STREET ADDRESS	11815 SNAPDRAGON RD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33635		5.4 CITY-ST-ZIP		
TITLE	~~D~~	☒ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	~~WIGGINS, BETTY P~~		6.2 NAME	MYERS, GWENDOLYN W.	
STREET ADDRESS	~~3708 E. MCBERRY STREET~~		6.3 STREET ADDRESS	2704 N. 32ND STREET	
CITY-ST-ZIP	~~TAMPA FL 33610~~		6.4 CITY-ST-ZIP	TAMPA, FL. 33605	

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GWENDOLYN W. MYERS Gwendolyn W. Myers 4/27/98 (813) 276-2891