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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 759742

1. Corporation Name

FLORIDA STATE LEADERSHIP CONFERENCE ZETA PHI BET A SORORITY, INCORPORATED

Principal Place of Business

801 N KOTTLE CIRCLE DAYTONA BCH FL 32114 US

Mailing Address

801 N KOTTLE CIRCLE DAYTONA BCH FL 32114 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

08/21/1981

4. FEI Number

59-2755092

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

GALLMAN, HELEN B 801 N KOTTLE CIRCLE DAYTONA BCH FL 32114

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP [] DELETE

SP GALLMAN, HELEN B 801 N KOTTLE CIRCLE DAYTONA BCH FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP [] DELETE

M JOHNSON, FRANCIS 2624 EAST NORTH BAY TAMPA FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP [] DELETE

S BLOUNT, KAREN W SOROR 5920 NW 14TH COURT SUNSHINE FL 33313

TITLE NAME STREET ADDRESS CITY-ST-ZIP [] DELETE

ST WRIGHT, HURETTA 1031 HAMPTON ROAD DAYTONA BCH. FL 32114

TITLE NAME STREET ADDRESS CITY-ST-ZIP [] DELETE

TD HOWARD, CARRIE W RTE. 1, BOX 125A LAMONT FL 32336

TITLE NAME STREET ADDRESS CITY-ST-ZIP [] DELETE

CD SUMPTER, LEONA 820 CRAWFORD STREET QUINCY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE [] Change [] Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE [] Change [] Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE [] Change [] Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE [] Change [] Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE [] Change [] Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE [] Change [] Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE: [Handwritten Signature] 2/18/99 (904) 255-3243

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)