## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#810440**

Entity Name: PHI-BETA-PSI

FILED Feb 03, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** C/O DOROTHY DILLON 4440 IRONWOOD CIRCLE, 209D BRADENTON, FL 342096809 US **New Mailing Address: Current Mailing Address:** C/O DOROTHY DILLON 4440 IRONWOOD CIRCLE, 209D BRADENTON, FL 342096809 US FEI Number: 31-6043811 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DILLON, DOROTHY 4440 IRONWOOD CIRCLE, 209D BRADENTON, FL 34209 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete PIERCE, CINDY KARRICK, MARLENE Name: Name: 91 NASHUA DRIVE Address: 2874 FREYER ROAD Address: City-St-Zip: CLARKSVILLE, IN 47129 City-St-Zip: LIMA, OH 45807 Title: Title: ( ) Delete () Change () Addition MOUNT, CINDY Name: Name: Address: 660 N. GARDNER STREET Address: City-St-Zip: SCOTTSBURG, IN 47170 City-St-Zip: Title: VD. () Delete Title: (X) Change ( ) Addition HALL, CHERYL FRANKLIN, MARY Name: Name: 241 S CHARLESTON A Address: 1729 KENT STREET Address: City-St-Zip: ANAHEIM, CA 92806 City-St-Zip: CORONA, AZ 85641 Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: SMITH, MARTHA Name: STEWART, KATHY Address: 1370 N 475 E Address: 718 WEGER STREET City-St-Zip: COLUMBUS, IN 47203 City-St-Zip: ELIDA, OH 45807 Title: () Delete Title: () Change () Addition BALL, SHERRY Name: Name: 8636 FAWN LAKE CIRCLE Address: Address: City-St-Zip: INDIANAPOLIS, IN 46278 City-St-Zip: Title: () Delete Title: () Change () Addition SIDEBOTHAM, BARBARA Name: Name: Address: 268 THAMES COURT Address: LONDON, OH 43140 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARLENE KARRICK P 02/03/2004