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Feb 09 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N02968 (8)

1. Corporation Name

BETA TAU ZETA CHAPTER OF ZETA PHI BETA SORORITY,
INC.

Principal Place of Business

Mailing Address

1035 N.W. 57 STREET
P.O. BOX 471000
MIAMI FL 33147

1035 N.W. 57 STREET
P.O. BOX 471000
MIAMI FL 33147



3. Date Incorporated or Qualified

05/09/1984

4. FEI Number

52-1345295

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 10850 S.W. 164 STREET

26 P O Box 471000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SAME

27

City & State

City & State

23 MIAMI, FLORIDA

28 MIAMI, FLORIDA

Zip

Country

Zip

Country

24 33157

25

29 33247

30

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMPSON, VERA
43440 NW 186 ST
MIAMI FL 33055

81 Name

SAME

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MARIETTA BULLARD
STREET ADDRESS 1035 N.W. 57TH STREET
CITY-ST-ZIP MIAMI FL

☒ DELETE

TITLE SVP
NAME KOCH, FRANCENA
STREET ADDRESS 10850 S.W. 164 ST
CITY-ST-ZIP MIAMI FL

☒ DELETE

TITLE S-D
NAME DAWKINS, DEBRA
STREET ADDRESS 1840 NW 39 STREET
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE T D
NAME SHANNON, MARIAN H.
STREET ADDRESS 2191 NW 58 ST.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE FVP-D
NAME LEE, DOROTHY
STREET ADDRESS 3459 PERCIVAL AVE
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE D
NAME GODFREY, ALBERTA W
STREET ADDRESS 1054 NW 38 STREET
CITY-ST-ZIP MIAMI FL

☐ DELETE

1.1 TITLE
NAME PRESIDENT FRANCENA JONES KOCH
STREET ADDRESS 10850 S.W. 164 STREET
CITY-ST-ZIP MIAMI, FLORIDA 33157

☒ Change ☐ Addition

2.1 TITLE
NAME 2ND VICE PRES. LULA RANDALL
STREET ADDRESS 14305 S.W. 109 COURT
CITY-ST-ZIP MIAMI, FLORIDA 33176

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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: MARIAN H. SHANNON, MARIAN H. Shannon Jan 7 1998 1305-7002

CR2E037 (10/97)