

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90054 039 *****70.00

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1. Entity Name

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



Principal Place of Business

1743-1749 NW 54TH ST.
MIAMI FL 33142
US

Mailing Address

3459 PERCIVAL AVENUE
MIAMI FL 33133-5040
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

52-1345295

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILLIAMS, BRENDA S
16820 NW 20TH AVENUE
MIAMI FL 33056**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	WILLIAMS, BRENDA S	
STREET ADDRESS	16820 NW 20TH AVENUE	
CITY-STATE-ZIP	MIAMI FL 33056	
TITLE	VPD	☒ Delete
NAME	DAVIS-ROLLE, JOSEPHINE	
STREET ADDRESS	740 NW 168TH DRIVE	
CITY-STATE-ZIP	MIAMI FL 33169	
TITLE	VPD	☒ Delete
NAME	BAKER, ANNIE B	
STREET ADDRESS	1920 NW 191ST TERRACE	
CITY-STATE-ZIP	MIAMI FL 33056	
TITLE	TD	☐ Delete
NAME	LEE, DOROTHY P	
STREET ADDRESS	3459 PERCIVAL AVENUE	
CITY-STATE-ZIP	MIAMI FL 33133	
TITLE	CD	☐ Delete
NAME	TULLIS, JEANETTE Y.	
STREET ADDRESS	19011 NW 23RD COURT	
CITY-STATE-ZIP	MIAMI FL 33056	
TITLE	SD	☐ Delete
NAME	WILLIAMS, LAWANDA J	
STREET ADDRESS	12940 NW 20TH AVE	
CITY-STATE-ZIP	MIAMI FL 33167	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	BAKER, ANNIE B.	
STREET ADDRESS	3802 OAK AVENUE	
CITY-STATE-ZIP	MIAMI, FL. 33133	
TITLE	VPD	☐ Change ☒ Addition
NAME	BROWN, AVIS F. L.	
STREET ADDRESS	P.O. BOX 680668	
CITY-STATE-ZIP	MIAMI, FL. 33168	
TITLE	VPD	☐ Change ☒ Addition
NAME	KERR, JOHANNIE MAE	
STREET ADDRESS	2330 N.W. 182ND TERRACE	
CITY-STATE-ZIP	MIAMI GARDENS, FL. 33056	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dorothy P. Lee DOROTHY P. LEE APRIL 24, 2007 305-448-9501