

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003787

FILED
Apr 14, 2009
Secretary of State

Entity Name: FAMU- SIGMA LAMBDA GAMMA, INC.

Current Principal Place of Business:

503 PALM BEACH
APT 212
TALLAHASSEE, FL 32310 US

Current Mailing Address:

503 PALM BEACH
APT 212
TALLAHASSEE, FL 32310 US

New Principal Place of Business:

1834 JACKSON BLUFF RD
APT F21
TALLAHASSEE, FL 32304 US

New Mailing Address:

1834 JACKSON BLUFF RD
APT F21
TALLAHASSEE, FL 32304 US

FEI Number: 32-0062193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERSAD, TRISHA
1303 OCALA RD
APT 270
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

MAHDAVIAN, SOHEYLA
1834 JACKSON BLUFF RD
APT F21
TALLAHASSEE, FL 32304 US

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: SOHEYLA MAHDAVIAN

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIRON, ERICKA
Address: 631 E. CALL ST APT 406
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: VD () Delete
Name: BATTS, JONI
Address: 4240 RALEIGH WAY
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: TD () Delete
Name: MAHDAVAIN, SOHEYLA
Address: 503 PALM BEACH APT. #212
City-St-Zip: TALLAHASSEE, FL 32310 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JACKSON, JAMEEA
Address: 1834 JACKSON BLUFF RD APT F21
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: LIBETH, SANCHEZ
Address: 1834 JACKSON BLUFF RD APT F21
City-St-Zip: TALLAHASSEE, FL 32304 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JONI BATTS

VD

04/14/2009

Electronic Signature of Signing Officer or Director

Date