

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004129

FILED
Mar 10, 2006
Secretary of State

Entity Name: HONOR SOCIETY OF OMICRON TAU THETA INC.

Current Principal Place of Business:

P. O. BOX 19-1496
MIAMI BCH, FL 33119

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 19-1496
MIAMI BCH, FL 33119

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAMMONS, FRANK T
465 OCEAN DR., #319
MIAMI BCH, FL 33139 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: DECKER, CAROL
Address: LINCOLN MEMORIAL UNIVERSITY
City-St-Zip: NIOTA, TN 37826

Title: D () Delete
Name: ADAMS, ELAINE
Address: UNIVERSITY OF GEORGIA
City-St-Zip: ATHENS, GA 30602

Title: SD () Delete
Name: ERIC, LICHTENBERGER
Address: VA TECH UNIVERSITY
City-St-Zip: BLACKSBURG, VA 24061

Title: TD () Delete
Name: WOMBLE, MYRA N
Address: UNIVERSITY OF GEORGIA
City-St-Zip: ATHENS, GA 30602

Title: D () Delete
Name: BLEDSOE, JOSH
Address: NORTH CAROLINA STATE UNIVERSITY
City-St-Zip: RALEIGH, NC 27695

Title: EXD () Delete
Name: SMITH, CLIFF
Address: UNIVERSITY OF GEORGIA
City-St-Zip: ATHENS, GA 30602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DE (X) Change () Addition
Name: LISTON, JON
Address: UNIVERSITY OF GEORGIA
City-St-Zip: ATHENS, GA 30602

Title: DIR (X) Change () Addition
Name: ERIC, LICHTENBERGER
Address: VA TECH UNIVERSITY
City-St-Zip: BLACKSBURG, VA 24061

Title: TD (X) Change () Addition
Name: SYMANOSKIE, JEANNE
Address: UNIVERSITY OF GEORGIA
City-St-Zip: ATHENS, GA 30602

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIC LICHTENBERGER

DIR

03/10/2006

Electronic Signature of Signing Officer or Director

Date