

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009345

FILED
Apr 25, 2007
Secretary of State

Entity Name: THE THETA BETA FOUNDATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

617 W LUMSDEN ROAD
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

617 W LUMSDEN ROAD
BRANDON, FL 33511

New Mailing Address:

FEI Number: 20-1739102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGAN, ROBERT W
617 W LUMSDEN ROAD
BRANDON, FL 33511 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: D () Delete
Name: BENNETT, CHARLES L
Address: 638 HICKORY LANE
City-St-Zip: BERWYN, PA 19312

Title: D () Delete
Name: COOPERSMITH, RANDALL S
Address: 18908 WOODBURN ROAD
City-St-Zip: LEESBURG, VA 20175

Title: D () Delete
Name: HAGAN, ROBERT W
Address: 4414 SWIFT CIRCLE
City-St-Zip: VALRICO, FL 33549

Title: D () Delete
Name: RAULERSON, DANIEL D
Address: 2911 ASTON AVE
City-St-Zip: PLANT CITY, FL 33567

Title: D () Delete
Name: BOWERS, RICHARD
Address: 11401 SUNCREEK PLACE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D () Delete
Name: TALLEY, CHARLES D JR
Address: 1335 OAKFIELD DR
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: DANIEL D RAULERSON

D

04/25/2007

Electronic Signature of Signing Officer or Director

Date