

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007481

FILED
Apr 25, 2006
Secretary of State

Entity Name: ETA SIGMA DELTA FLORIDA INC

Current Principal Place of Business:

225 N FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

225 N FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

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:

BRERETON, MAHALIA L
1306 NW 15 TERRACE
FT. LAUDERDALE, FL 33311 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: P () Delete
Name: BRERETON, MAHALIA L
Address: 1306 NW, 15TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: VP () Delete
Name: CARTWRIGHT, MELISSA
Address: 225 N FEDERAL HIGHWAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: SEC () Delete
Name: SIAS, MELISA
Address: 225 N FEDERAL HIGHWAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: TRES () Delete
Name: BROWN, RECHELLE
Address: 1401 VILLAGE BLVD 1316
City-St-Zip: WEST PALM BEACH, FL 33409

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
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: MAHALIA BRERETON

P

04/25/2006

Electronic Signature of Signing Officer or Director

Date