## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2008 8:00 am Secretary of State

| Pinnicipal Place of Business   Pinnicipal Place of Business   No P.O. Box #   3. Mailing Address   | 1. Entity Nam                                  | MMA ZETA CHAPTER, ZETA I   |                            | Secretary of State<br>05-02-2008 90171 049 ****70.00 |                                       |                         |                        |               |
|--|--|--|----------------------------|--|---------------------------------------|-------------------------|------------------------|---------------|
| Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   O4292008   Cng. Np.   CR2E037 (12/06)  | 1110 ASTUR                                     | RIA WAY S. I   | 33733 US                   |  |                                       |                         |                        |               |
| City & State   | 2. Principal F                                 | Place of Business - No P.O. Box # 3.                                   | Mailing Address            |  |                                       |                         |                        |               |
| Signature   Specificate   Sp   | Suite, Apt. #, etc. S                          |  | Suite, Apt. #, etc.        | Suite, Apt. #, etc.                                  |                                       | CR2E037                 | (12/06)                |               |
| See Required   See    | City & State                                   |  | City & State               |  |                                       |                         | $\rightarrow$          |               |
| Name   | Zip  | Country  | Zip                        | Country  | 5. Certificate of Status E            | Desired                 | 8.75 Add<br>ee Require | litional<br>d |
| SIGNATURE    Silvent Address (P.O. Box Number is Not Acceptable)   |  | 6. Name and Address of Current Regis                                   | stered Agent               |  | 7. Name and Address of                | of New Registered A     | gent                   |               |
| B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, I am familiar with, and accept of changing its registered agent, or both, in the State of Florida, I am familiar with, and accept of change of registered agent.    SIGNATURE   | BELL, ALMA S 1110 ASTURIA WAY SOUTH Street Add |  |                            |  | s (P.O. Box Number is Not Ac          | cceptable)              |                        |               |
| SIGNATURE    Signature   Superior   Impediate   Superior   Impediate   Superior   Impediate   Superior   Impediate   Impediate |  |  |                            | City   |                                       | FL                      | Zip Code               | e             |
| Filling Fee is \$81.25   Due by May 1, 2008   Diete   Special Received Agent signature of Agent signature o  | 8. The above<br>the obligat                    | named entity submits this statement for the tions of registered agent. | ourpose of changing its re | egistered office or regist                           | tered agent, or both, in the St       | ate of Florida. I am fa | miliar with,           | and accept    |
| Trust Fund Contribution  | SIGNATURE                                      |  | if applicable. (NOTE:      | Registered Agent signature requi                     | red when reinstating)                 | DATE                    |                        | <del></del>   |
| TITLE PROPERTY OFFICERS AND DIRECTORS IN 10   Delete NAME   STREET ADDRESS   CITY-ST-2P  SAINT PETERSBURG, FL   Delete STREET ADDRESS   CITY-ST-2P  SAINT PETERSBURG, FL   Delete STREET ADDRESS   CITY-ST-2P  SAINT PETERSBURG, FL   Delete STREET ADDRESS   CITY-ST-2P  SAINT PETERSBURG, FL   STREET ADDRESS   SAINT PETERSBURG, FL   STREET ADDRESS   STREET ADDRESS  |  |  |                            |  | \$5.00 May Be<br>Added to Fees        | Florida Denarte         | nent of Si             | late          |
| BELL, ALMA S STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILL MAME BELL, ALMA STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLSON, LISA STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLSON, LISA STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLSON, LISA STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE S SET SAINT PETERSBURG, FL  TITLE WILLSON, LISA STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE S SET SAINT PETERSBURG, FL  TITLE WILLSON, LISA STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE S SIRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLLAMAS STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLLAMS STRET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLLAMS, JACQULIN STREET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLLAMS, JACQULIN STREET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLLAMS, JACQULIN STREET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLLAMS, JACQULIN STREET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE WILLLAMS, JACQULIN STREET ADDRESS CITY-ST-ZP SAINT PETERSBURG, FL  TITLE MILLE ST MULLEN, KAY 1616 42ND ST S SAINT PETERSBURG, FL  33712  TITLE MILLE MILLE MAKE STREET ADDRESS CITY-ST-ZP CITY-ST- |  | · · · · · · · · · · · · · · · · · · ·                                  |                            |  | ADDITIONS/CHANGES TO                  | OFFICERS AND DIR        | ECTORS IN              | 10            |
| MAME   STREET ADDRESS   CITY-ST-ZIP   SAINT PETERSBURG, FL 33712   CITY-ST-ZIP   SAINT PETERSBURG, FL 33712   CITY-ST-ZIP   Change   Addition   | name<br>Street address                         | BELL, ALMA S<br>1110 ASTURIA WAY S.                                    | ∟J Delete                  | name<br>Street address                               |                                       |                         | () Change              | ☐ Addition    |
| NAME STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP  TITLE  TO Belete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TO BELET STREET ADDRESS CITY-ST-ZIP TITLE TO BELET STREET ADDRESS CITY-ST-ZIP TITLE TO BELET STREET ADDRESS CITY-ST-ZIP TITLE TO BELET STREET ADDRESS CITY-ST-ZIP TITLE TO BELET STREET ADDRESS CITY-ST-ZIP TITLE ST BELT ADDRESS CITY-ST-ZIP TITLE ST BELT ADDRESS CITY-ST-ZIP TITLE ST BELT ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE ST BELT ADDRESS TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33712 TITLE NAME STREET ADDRESS CITY-ST-ZIP   | NAME<br>STREET ADDRESS                         | BELL, ALMA<br>1110 ANSURIA WAYS  | ☐ Delete                   | name<br>Street adoress                               |                                       |                         | Change                 | Addition      |
| NAME STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33702 CITY-ST-ZIP  TITLE TLE ST Delete TITLE ST TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE ST Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE ST DELETE STREET S STREET ADDRESS CITY-ST-ZIP  TITLE ST DELETE STREET S STREET ADDRESS CITY-ST-ZIP  TITLE ST DELETE STREET ADDRESS CITY-ST-ZIP  TITLE ST STREET ADDRESS CITY-ST-ZIP  TITLE ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE ST STREET ADDRESS STREET ADDRE | NAME<br>STREET ADDRESS                         | WILSON, LISA<br>5925 25TH STREET S                                     | ☐ Delete                   | NAME<br>STREET ADDRESS                               |                                       |                         | Change                 | Addition      |
| NAME STREET ADDRESS CITY-ST-ZIP  TITLE STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  NAME  STREET ADDRESS CITY-ST-ZIP  MULLEN, KAY STREET ADDRESS CITY-ST-ZIP  SAINT PETERSBURG, FL 33712  NAME  STREET ADDRESS CITY-ST-ZIP  SAINT PETERSBURG, FL 33712  NAME  STREET ADDRESS CITY-ST-ZIP  SAINT PETERSBURG, FL 33712  NAME  STREET ADDRESS CITY-ST-ZIP  | name<br>Street address                         | EVERETT, JENNIFER<br>450 76TH AVENUE N. APT 3085                       | ☐ Delete                   | name<br>Street address                               |                                       |                         | Change                 | Addition      |
| NAME · MULLEN, KAY NAME  STREET ADDRESS 1616 42ND ST S  CITY-ST-ZIP SAINT PETERSBURG, FL 33712 CITY-ST-ZIP   | HAME<br>Street address                         | WILLIAMS, JACQULIN<br>4024 31ST STREET S                               | □ Delete                   | NAME<br>STREET ADDRESS                               |                                       |                         | ☐ Change               | ☐ Addition    |
|  | TITL C   | LOT  | Delete                     |  | · · · · · · · · · · · · · · · · · · · |                         | C                      |               |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attacking with an address, with all other like empowered.

SIGNATURE: