

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08927

FILED
May 26, 2009
Secretary of State

Entity Name: ZETA GAMMA ZETA CHAPTER, ZETA PHI BETA SORORITY, INC.

Current Principal Place of Business:

1110 ASTURIA WAY S.
SAINT PETERSBURG, FL 33712 US

New Principal Place of Business:

5925 25TH STREET SOUTH
SAINT PETERSBURG, FL 33712 US

Current Mailing Address:

PO BOX 10627
SAINT PETERSBURG, FL 33733 US

New Mailing Address:

FEI Number: 59-6178347 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BELL, ALMA S
1110 ASTURIA WAY SOUTH
SAINT PETERSBURG, FL 33712 US

Name and Address of New Registered Agent:

WILSON, LISA M
5925 25TH STREET SOUTH
SAINT PETERSBURG, FL 33712 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: LISA WILSON

05/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BELL, ALMA S
Address: 1110 ASTURIA WAY S.
City-St-Zip: SAINT PETERSBURG, FL

Title: VD () Delete
Name: BELL, ALMA
Address: 1110 ANSURIA WAYS
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: V (X) Delete
Name: WILSON, LISA
Address: 5925 25TH STREET S
City-St-Zip: SAINT PETERSBURG, FL

Title: S () Delete
Name: EVERETT, JENNIFER
Address: 450 76TH AVENUE N. APT 3085
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: T () Delete
Name: WILLIAMS, JACQULIN
Address: 4024 31ST STREET S
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: ST () Delete
Name: MULLEN, KAY
Address: 1616 42ND ST S
City-St-Zip: SAINT PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, LISA M
Address: 5925 25TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: VP (X) Change () Addition
Name: MILLER, DAPHNE
Address: 642 61ST AVENUE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

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

Title: S (X) Change () Addition
Name: JOHNSON, NICOLE
Address: 101 SOUTH OLD COACHMAN RD #115
City-St-Zip: CLEARWATER, FL 33765

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

Title: FS (X) Change () Addition
Name: SMITH, BETTY
Address: 4301 CORTEZ WAY SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

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: LISA WILSON

P

05/26/2009

Electronic Signature of Signing Officer or Director

Date