2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N12376

Entity Name: EPSILON EPSILON ZETA CHAPTER, INC.

Current Principal Place of Business:

P. O. BOX 555682
ORLANDO, FL 32855 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 555682
ORLANDO, FL 32855

New Mailing Address:

FEI Number: 59-6178356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROYAL, LASHONDA
1341 KINTLA RD
APOPKA, FL 32712 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: PRES ( ) Delete
Name: ROYAL, LASHONDA N
Address: 1341 KINTLA ROAD
City-St-Zip: APOPKA, FL 32712

Title: VP ( ) Delete
Name: SISSOKO, SCHELLIE
Address: 3011 STILLWATER DR
City-St-Zip: KISSIMMEE, FL 34743 US

Title: 2VP ( ) Delete
Name: EVANS, DEBORAH
Address: 23718 WOLF BRANCH RD
City-St-Zip: SORRENTO, FL 32776

Title: ST ( ) Delete
Name: HARDY, KRISTLE
Address: PO BOX 555682
City-St-Zip: ORLANDO, FL 32855

Title: TRES ( ) Delete
Name: OSBORNE, DIANE
Address: 3107 HOLLAND DRIVE
City-St-Zip: ORLANDO, FL 32825

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:

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: DIANE Y. OSBORNE TRES 04/17/2009
Electronic Signature of Signing Officer or Director — Date