

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Mar 22, 2007**  
**Secretary of State**

DOCUMENT# N29374

**Entity Name:** GAMMA MU FOUNDATION, INC.**Current Principal Place of Business:**721 NE 3RD AVENUE  
FORT LAUDERDALE, FL 33304 US**New Principal Place of Business:**612 NE 26TH STREET  
WILTON MANORS, FL 33305 US**Current Mailing Address:**1975 EAST SUNRISE BLVD  
SUITE 624  
FORT LAUDERDALE, FL 33304 US**New Mailing Address:**1975 EAST SUNRISE BLVD  
FT LAUDERDALE, FL 33304 US**FEI Number:** 33-0351175**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MOODY, JOHN ESQ  
612 NE 26TH ST  
WILTON MANORS, FL 33305 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/P ( ) Delete  
**Name:** THOMPSON, KENNETH L  
**Address:** 92 HERRICK ROAD  
**City-St-Zip:** BOXFORD, MA 01921 US**Title:** D/V/P ( ) Delete  
**Name:** LEWIS, JACK V  
**Address:** 2344 THROCKMORTON STREET  
**City-St-Zip:** DALLAS, TX 75219 US**Title:** D/T ( ) Delete  
**Name:** SHERROD, JIM H  
**Address:** 1108 CLIFTON LANE  
**City-St-Zip:** NASHVILLE, TN 37204 US**Title:** D/S ( ) Delete  
**Name:** CULBRETH, MARTIN W  
**Address:** 4085 RED BUD CIRCLE  
**City-St-Zip:** DOYLESTOWN, PA 18901**Title:** D ( ) Delete  
**Name:** PETTIT, CLIFF JR  
**Address:** 2872 NE 25TH COURT  
**City-St-Zip:** FORT LAUDERDALE, FL 33305**Title:** D ( ) Delete  
**Name:** CONNELL, JOHN R  
**Address:** 6630 E 6TH AVENUE  
**City-St-Zip:** DENVER, CO 80220**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D/P (X) Change ( ) Addition  
**Name:** THOMPSON, KENNETH L  
**Address:** 91 HERRICK ROAD  
**City-St-Zip:** BOXFORD, MA 01921 US**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 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: MARTIN W. CULBRETH

D/S

03/22/2007

Electronic Signature of Signing Officer or Director

Date