


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2004 8:00 am
Secretary of State

07-22-2004 90090 001 ****61.25
07-22-2004 90090 002 *****8.75

DOCUMENT # N94000005883		
1. Entity Name BETA TAU ZETA ROYAL ASSOCIATION, INC.		

Principal Place of Business 1748-1749 NW 54 ST MIAMI, FL 33142 US	Mailing Address P.O. BOX 471000 MIAMI, FL 33247
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66430445



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

07132004 Chg-NP CR2E037 (10/03)

City & State	City & State
Zip	Country

4. FEI Number 65-0539694	Applied For Not Applicable
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6. Name and Address of Current Registered Agent	
VICKERS, ROSETTA J 1050 NW 87 ST MIAMI, FL 33150	

5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
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SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		DATE _____	
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Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VICKERS, ROSETTA J 1030 N.W. 67 STREET MIAMI, FL 33150 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LAWSON, LORENE B. 4710 N.W. 11TH AVE. MIAMI, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VAUGHT, LORRAINE 5221 N.W. 5 AVE. MIAMI, FL 33179 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILKES, KEMP 12750 SW 92 COURT MIAMI, FL 33176 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WILLIAMS, BRENDA S 16820 N.W. 20 AVE. MIAMI, FL 33056 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KERR, JOHNNIE M. 2330 N.W. 187 TERRACE MIAMI, FL 33056 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITEHEAD, ROSA 6053 SW 63RD TERRACE MIAMI, FL 33143 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HARDEN, DORIS 2300 NW 152 TERR MIAMI, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachment with an address, with all other like empowered.	
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SIGNATURE: <u>Rosetta J. Vickers</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: <u>July 19, 2004</u> <small>Daytime Phone: _____</small>
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Business Entity Name

BETA TAU ZETA ROYAL ASSOCIATION, INC.

FEI Number 650539694

FEI Number Status Applied For Not Applicable Current

Certificate of Status Desired Yes No

Principal Place of Business

Address 1743-1749 NW 54 ST

Suite, Apt. #, etc.

City, State MIAMI, FL

Zip Code & Country 33142 US

Mailing Address

Address P.O. BOX 471000

Suite, Apt. #, etc.

City, State MIAMI, FL

Zip Code & Country 33247

Name And Address of Registered Agent

Name (Last, First, Middle, Title) VICKERS, ROSETTA, J.

or RA Business Name

Address 1050 NW 87 ST

Suite, Apt. #, etc. P.O. Box 381076

City, State MIAMI, FL

Zip Code & Country 33150 US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature Rosetta J. Vickers



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Business Entity Name

BETA TAU ZETA ROYAL ASSOCIATION, INC.

Election Campaign Financing Trust Fund Contribution Yes No

Officer/Director Name And Address

Title	PD
Name (Last, First, Middle, Title)	VICKERS ROSETTA J
-or- Entity Name	
Street Address	1030 N.W. 67 STREET
City, State	MIAMI, FL
Zip Code & Country	33150
Title	VPD
Name (Last, First, Middle, Title)	HARDEN DORIS
-or- Entity Name	
Street Address	2300 N.W. 1152 TERR.
City, State	MIAMI, FL
Zip Code & Country	33054
Title	D
Name (Last, First, Middle, Title)	WILKES KEMP, SR.
-or- Entity Name	
Street Address	12750 SW 92 COURT
City, State	MIAMI, FL
Zip Code & Country	33176
Title	TD
Name (Last, First, Middle, Title)	KERR JOHNNIE M
-or- Entity Name	
Street Address	2330 NW 182 TERR

Attachment
66430445# *N9400000583*

City, State MIAMI, FL
Zip Code & Country 33056

Title D
Name (Last, First, Middle, Title) WHITEHEAD ROSA

-or- Entity Name

Street Address 6053 SW 63RD TERRACE

City, State MIAMI, FL

Zip Code & Country 33143

Title SD
Name (Last, First, Middle, Title) VAUGHT LORRAINE

-or- Entity Name

Street Address 5221 NW 5 AVENUE

City, State MIAMI, FL

Zip Code & Country 33179

List more than six Officers/Directors No additional Officers/Directors to list

An individual named above must type their name in the
'Officer/Director Signature' block below. A corporate name is not
allowed in this block.

Title

PD

Officer/Director Signature Rosetta J. Vickers



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