## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000005883

FILED Apr 01, 2009 Secretary of State

Entity Name: BETA TAU ZETA ROYAL ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1743-1749 MIAMI, FL	NW 54 ST 33142 US				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX ( MIAMI, FL					
FEI Number:	: 65-0539694	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
VICKERS, ROSETTA J 1050 NW 87 ST MIAMI, FL 33150 US					
	named entity s e of Florida.	submits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent			t	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TD () TAYLOR, LILLIA 17940 NW 7TH MIAMI, FL 3310	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () VAUGHT, LORR 5221 NW 5 AVE MIAMI, FL 331	<u>:</u>	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CD () HOWARD, ULY 5097 S.W. 167 MIRAMAR, FL	AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () KERR, JOHNNII 2330 NW 187 T MIAMI, FL 330	ERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MAULL, ALVA 1150 NW 87TH MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROSETTA J. VICKERS PRES 04/01/2009