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FILED

Feb 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P10855 (5)

1. Corporation Name

PHI SIGMA SIGMA, INC.



Principal Place of Business

Mailing Address

23123 STATE ROAD 7
SUITE 250
BOCA RATON FL 3342823123 STATE ROAD 7
SUITE 250
BOCA RATON FL 33428-54073. Date Incorporated or Qualified
07/22/19863a. Date of Last Report
03/14/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

53-0220898

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACEY, DIANNE
23123 STATE ROAD 7
SUITE 250
BOCA RATON FL 33428

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME KIER ZIRRETTA, LOUISE
STREET ADDRESS 3428 JANELLEN DR.
CITY - ST - ZIP BALTIMORE MD1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Chris Senseney
1.3 STREET ADDRESS 262 Scott Court
1.4 CITY - ST - ZIP Spotswood, NJ 08884TITLE D ☐ DELETE
NAME MACEY, DIANNE
STREET ADDRESS 23123 STATE RD.7 #250
CITY - ST - ZIP BOCA RATON FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE D ☒ DELETE
NAME SENSENEY, CHRIS
STREET ADDRESS 262 SCOTT CT.
CITY - ST - ZIP SPOTSWOOD NJ 088843.1 TITLE D ☐ Change ☒ Addition
3.2 NAME Gina Kerley
3.3 STREET ADDRESS 868 Ursa Lane
3.4 CITY - ST - ZIP Foster City, CA 94404TITLE D ☒ DELETE
NAME JOSETTE, GEORGE
STREET ADDRESS 47 WINDBROOK CIR.
CITY - ST - ZIP GAITHERSBURG MD 208794.1 TITLE D ☐ Change ☒ Addition
4.2 NAME Esther Graves
4.3 STREET ADDRESS 76 Ponderosa Drive
4.4 CITY - ST - ZIP Oregon, OH 43616TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Dianne Macey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR1/30/97
Date561-451-4415
Daytime Phone # 0041988

CP2E037 (9/96)