825 9TH STRE	<b>ncipal Place of Business:</b> ET EACH, FL 33401			
Current Mai	ling Address:			
825 9TH STI WEST PALM	REET 1 BEACH, FL 33401 US			
FEI Number: 59-6209627			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
WILLIAMS, TREMETRA DENISE				
825 9TH STREET WEST PALM BEACH, FL 33401 US				
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: TREMETRA DENISE WILLIAMS				1.
SIGNATURE	: TREMETRA DENISE WILLIAMS	0		3/07/2023
SIGNATURE	Electronic Signature of Registered Agent			
SIGNATURE	Electronic Signature of Registered Agent			3/07/2023
	Electronic Signature of Registered Agent	Title		3/07/2023
Officer/Dire	Electronic Signature of Registered Agent		C	3/07/2023
<b>Officer/Dire</b> Title	Electronic Signature of Registered Agent ctor Detail : PRESIDENT	Title	VP	3/07/2023
<b>Officer/Dire</b> Title Name	Electronic Signature of Registered Agent ctor Detail : PRESIDENT WILLIAMS, TREMETRA DENISE 825 9TH STREET	Title Name	VP HYDE-DOZIER, SABRINA	3/07/2023
<b>Officer/Dire</b> Title Name Address	Electronic Signature of Registered Agent ctor Detail : PRESIDENT WILLIAMS, TREMETRA DENISE 825 9TH STREET	Title Name Address	VP HYDE-DOZIER, SABRINA 1206 ROSE GATE BOULEVARD	3/07/2023
Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : PRESIDENT WILLIAMS, TREMETRA DENISE 825 9TH STREET WEST PALM BEACH FL 33401	Title Name Address City-State-Zip:	VP HYDE-DOZIER, SABRINA 1206 ROSE GATE BOULEVARD RIVIERA BEACH FL 33404	03/07/2023 Date
Officer/Direc Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : PRESIDENT WILLIAMS, TREMETRA DENISE 825 9TH STREET WEST PALM BEACH FL 33401 FINANCIAL SECRETARY	Title Name Address City-State-Zip: Title	VP HYDE-DOZIER, SABRINA 1206 ROSE GATE BOULEVARD RIVIERA BEACH FL 33404 TREASURER	03/07/2023 Date

I hereby 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 all other like empowered.

### SIGNATURE: TREMETRA DENISE WILLIAMS

Electronic Signature of Signing Officer/Director Detail

03/07/2023

## Date

# 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N17000012727

Entity Name: WEST PALM BEACH ALUMNAE CHAPTER OF DELTA SIGMA THETA SORORITY, INC

## FILED Mar 07, 2023 **Secretary of State** 0710958735CC