

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003525

Entity Name: ZETA EDUCATIONAL THESPIAN ASSOCIATION,
INCORPORATED**Current Principal Place of Business:**11 TAYLOR AVENUE
EATONVILLE, FL 32751**Current Mailing Address:**POST OFFICE BOX 2301
EATONVILLE, FL 32751 US**FEI Number: 59-3384732****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WRIGHT, HURETTA M
1031 HAMPTON RD.
DAYTONA BEACH, FL 32114 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	PICKETT, ROSA S
Address	2785 BLUE RAVEN COURT
City-State-Zip:	LAKE MARY FL 32746

Title	ED
Name	BROWN, ROSA T
Address	2825 W. ORANGE AVE.
City-State-Zip:	TALLAHASSEE FL 32310-5911

Title	S
Name	DAVIS, GWENDOLYN W
Address	3111 FOX SQUIRREL DR.
City-State-Zip:	ORANGE PARK FL 32073-7656

Title	ST
Name	BOWIE, CHANTEL
Address	1449 PORTOFINO MEADOWS BLVD
City-State-Zip:	ORLANDO FL 32825

Title	D
Name	HERRING, CARRIE H
Address	3603 HOOD COURT
City-State-Zip:	TALLAHASSEE FL 32311

Title	D
Name	PARKER, EVA
Address	1431 MELVIN ST
City-State-Zip:	TALLAHASSEE FL 32301-4232

Title	TR
Name	BRUNSON-BOBB, JACQUELYN
Address	105 HEATHERWOOD BLVD.
City-State-Zip:	LAKE WALES FL 33859

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: ROSA S PICKETT**PRESIDENT****01/31/2021**

Electronic Signature of Signing Officer/Director Detail

Date