

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727894

FILED
Jan 04, 2006
Secretary of State

Entity Name: ALPHA ETA CHAPTER OF PHI KAPPA TAU FRATERNITY, INCORPORATED

Current Principal Place of Business:

1237 S.W. 2ND AVE.
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

PO BOX 13117
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number: 59-0633871 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COSGROVE, JOHN F.
8230 SW 192 STREET
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: NANNI, KEN
Address: 1237 S W 2ND AVE
City-St-Zip: GAINESVILLE, FL 00000,

Title: VD () Delete
Name: COSGROVE, JOHN
Address: 201 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33130

Title: PD () Delete
Name: CURRINGTON, JERRY,
Address: 2122 LAROCHELLE DR.
City-St-Zip: TALLAHASSEE, FL

Title: CD () Delete
Name: SCHOBYOLA, MIKE
Address: 445 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN F. COSGROVE

VD

01/04/2006

Electronic Signature of Signing Officer or Director

Date