## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#768755** 

FILED May 01, 2008 Secretary of State

Entity Name: TAU KAPPA EPSILON FRATERNITY, INC., OF FLORIDA STATE UNIVERSITY

**Current Principal Place of Business: New Principal Place of Business:** 1939 HERITAGE GROVE CIRCLE TALLAHASSEE, FL 32304 **Current Mailing Address: New Mailing Address:** 101 N. MONROE, STE 1090 1408 N PIEDMONT WAY TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32308 US FEI Number: 59-2346387 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: METZGER, KENNETH J ESQ METZGER, KENNETH J ESQ 101 N. MONROE, STE 1090 1408 N PIEDMONT WAY TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32308 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: 05/01/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KELLAM, ROBERT E Name: Name: 1521 BLOCKFORD CRT E. Address: Address: City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: Title: VD () Delete Title: VD (X) Change ( ) Addition STUBBS, CHARLES Name: IACINO, CLIFFORD J Name: Address: 2717 BEDFORD WAY Address: 1771 SW 30TH PL City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: FT. LAUDERDALE, FL 33315 Title: () Delete Title: () Change () Addition WILLIAM HOWARD, Name: Name: Address: 2854 LARIS DR Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: CLARK, TERRENCE L Name: UTTER, KENNETH J Address: 2016 GARDENBROOK LN Address: 134 ISLAND CIR City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: SARASOTA, FL 34242 Title: () Delete Title: ( ) Change (X) Addition MCCLOW, MARK W Name: Name: 8146 CAYUGA TRL W Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32244

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: ROBERT E. KELLAM PRES 05/01/2008