

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F01000002846

**FILED**  
**Nov 17, 2004**  
**Secretary of State****Entity Name:** ALPHA XI DELTA FRATERNITY, INC.**Current Principal Place of Business:**8702 FOUNDERS ROAD  
INDIANAPOLIS, IN 46268**New Principal Place of Business:****Current Mailing Address:**8702 FOUNDERS ROAD  
INDIANAPOLIS, IN 46268**New Mailing Address:****FEI Number:** 36-0720566 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
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:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:****Title:** P ( ) Delete  
**Name:** HOOPER SUTTON, JANE  
**Address:** 761 SILVERWOOD DR.  
**City-St-Zip:** LAKE MARY, FL 32746**Title:** VD ( ) Delete  
**Name:** TREADWELL-MILLER, CYNTHIA  
**Address:** 4253 EAST. BENNINGTON AVE.  
**City-St-Zip:** CASTLE ROCK, CO 80104**Title:** VD ( ) Delete  
**Name:** MASS, DEBORAH F  
**Address:** 21201 ANDREAS COURT  
**City-St-Zip:** ASHBURN, VA**Title:** VD ( ) Delete  
**Name:** OSBORNE, TRACY K  
**Address:** 1285 E. WANDSWORTH CIRCLE  
**City-St-Zip:** ROSELLE, IL 60172**Title:** VD ( ) Delete  
**Name:** JOHNSON, MARY  
**Address:** 3105 CEDAR AVENUE  
**City-St-Zip:** LINCOLN, NE 68502**Title:** VD ( ) Delete  
**Name:** SNYDER, MARY RUTH H  
**Address:** 6659 AINTROO COURT  
**City-St-Zip:** INDIANAPOLIS, IN 462504412**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change ( ) Addition  
**Name:** HOOPER SUTTON, JANE  
**Address:** 2010 CASTELLI BLVD  
**City-St-Zip:** MOUNT DORA, FL 32757**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VD (X) Change ( ) Addition  
**Name:** BRYON, PATRICE  
**Address:** 3840 EAST CARLYLE CT.  
**City-St-Zip:** MARIETTA, GA 30062**Title:** VD (X) Change ( ) Addition  
**Name:** HAWKINS, GINA K  
**Address:** 2125 VESTRIDGE DR.  
**City-St-Zip:** BIRMINGHAM, AL 35216**Title:** VD (X) Change ( ) Addition  
**Name:** REDA, MICHELLE  
**Address:** 7 CINDY ANN DR.  
**City-St-Zip:** RED BANK, NJ 07701**Title:** VD (X) Change ( ) Addition  
**Name:** VANDERPOOL, MELANIE  
**Address:** 6246 EAST BENT TREE DR  
**City-St-Zip:** SCOTTSDALE, AZ 85262

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JANE HOOPER SUTTON

PD

11/17/2004

Electronic Signature of Signing Officer or Director

Date