## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000010964

FILED Mar 29, 2006 Secretary of State

Entity Name: CHI PHI FRATERNITY-THETA DELTA CHAPTER, INC

	rincipal Place of Business:	New Principal Place of Business:
614 NW ( GAINSVILI	3RD PL LE, FL 32603	121 NW 3RD STREET OCALA, FL 34475
Current Mailing Address:		New Mailing Address:
614 NW ( GAINSVILI	3RD PL LE, FL 32603	121 NW 3RD STREET OCALA, FL 34475
El Number	: 20-3675713 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
lame and	Address of Current Registered Ager	nt: Name and Address of New Registered Agent:
SIMONS, ( 21 NW TI DCALA, FI	HIRD ST	
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
IGNATU		Data.
FFIGER	Electronic Signature of Registere	
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
tle: ame: ddress: ity-St-Zip:	DP ( ) Delete PELLETIER, MARC 1614 NW 3RD PL GAINSVILLE, FL 32603	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
· · · ·	DV ( ) Delete	Title: ( ) Change ( ) Addition
itle: ame: ddress: ity-St-Zip:	BRIGHTON, KENNY 1614 NW 3RD PL GAINSVILLE, FL 32603	Name: Address: City-St-Zip:
ame: ddress:	1614 NW 3RD PL	Address:
ame: ddress: ity-St-Zip: tle: ame: ddress:	1614 NW 3RD PL GAINSVILLE, FL 32603 DT () Delete SARRINE, EDDIE 14024402 BROWARD HALL	Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:
ame: ddress: tty-St-Zip: ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	1614 NW 3RD PL GAINSVILLE, FL 32603  DT ( ) Delete SARRINE, EDDIE 14024402 BROWARD HALL GAINESVILLE, FL 32612  DS ( ) Delete LIMPERT, JOSEPH 7110 NW 43RD LN	Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:

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: MARC PELLETIER DP 03/29/2006