

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91240 024 ****61.25

DOCUMENT # N43306 ✓
 1. Entity Name
 Gamma Iota of Alpha Delta-Pi House Corporation

Principal Place of Business Mailing Address
 831 W. Panhellenic Drive 831 W. Panhellenic Drive
 Gainesville, FL 32601 Gainesville, FL 32601

A0062677

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
 Zip Country Zip Country

4. FEI Number Applied For
 59-0641930 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 Susan H. Balloon
 10614 S.W. 52nd Avenue
 Gainesville, FL 32608

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. 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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to:
Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D Karolyn H. Watson	TITLE	
NAME	2814 N.W. 13th Court	NAME	
STREET ADDRESS	Gainesville, FL 32606	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D JoAn B. Anderson	TITLE	
NAME	19 Seascape Circle	NAME	
STREET ADDRESS	Crescent Beach, FL	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D Susan H. Balloon	TITLE	
NAME	10614 S.W. 52nd Avenue	NAME	
STREET ADDRESS	Gainesville, FL 32608	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D Peggy B. Kirkpatrick	TITLE	
NAME	2531 N.W. 41st Street, #D	NAME	
STREET ADDRESS	Gainesville, FL 32606	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D Heather White	TITLE	
NAME	230 N. Pine Avenue	NAME	
STREET ADDRESS	Inverness, FL	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D Lohse B. Beeland	TITLE	
NAME	2505 N.W. 18th Way	NAME	
STREET ADDRESS	Gainesville, FL 32605	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan H. Balloon Susan H. Balloon 4-19-01 352-373-0233
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/00)