

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764523

FILED
Jan 24, 2008
Secretary of State

Entity Name: FLORIDA EPSILON CHAPTER OF SIGMA ALPHA EPSILON HOUSING CORPORATION, INC.

Current Principal Place of Business:

4321 GREEK PARK DRIVE
ORLANDO, FL 32816 US

New Principal Place of Business:

Current Mailing Address:

4321 GREEK PARK DRIVE
ORLANDO, FL 32816 US

New Mailing Address:

915 OUTER ROAD
SUITE 100
ORLANDO, FL 32814 US

FEI Number: 59-2968064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESS, MIKE CPA
915 OUTER ROAD
SUITE 100
ORLANDO, FL 32814 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: P () Delete
Name: HALL, LINDA J
Address: 9950 LINGWOOD TR
City-St-Zip: ORLANDO, FL 32817 US

Title: T () Delete
Name: HESS, MIKE
Address: 5117 FENWOOD LANE
City-St-Zip: ORLANDO, FL 32814 US

Title: S () Delete
Name: PINN, MIKE
Address: 5754 MAGNOLIA BLOOM
City-St-Zip: OVIEDO, FL 32765 US

Title: D () Delete
Name: ZOOCK, STUART
Address: 729 MINERVA LANE
City-St-Zip: LAKE MARY, FL 32746 US

Title: D () Delete
Name: BALESTRIERE, RICHARD
Address: 14722 SAPODILLA
City-St-Zip: ORLANDO, FL 32828 US

Title: D () Delete
Name: TULLIS, TERRY
Address: 4225 HEMLOCK LANE
City-St-Zip: TITUSVILLE, FL 32780 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HALL, LINDA J
Address: 9950 LINGWOOD TR
City-St-Zip: ORLANDO, FL 32817 US

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

Title: P (X) Change () Addition
Name: KELLY, JOHN
Address: 3853 WINDING LAKE CIRCLE
City-St-Zip: ORLANDO, FL 32835 US

Title: D (X) Change () Addition
Name: DAVIS, BRIAN
Address: 4321 GREEK PARK DRIVE
City-St-Zip: ORLANDO, FL 32816 US

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 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: MIKE HESS

T

01/24/2008

Electronic Signature of Signing Officer or Director

Date