

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708095

Entity Name: PI BETA PHI HOUSE CORP. INC. - FLA. BETA CHAPTER #294**Current Principal Place of Business:**1154 TOWN & COUNTRY COMMONS DR.
TOWN & COUNTRY, MO 63017**Current Mailing Address:**1154 TOWN AND COUNTRY COMMONS DR
TOWN AND COUNTRY, MO 63017 US**FEI Number:** 59-6214591**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
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**Officer/Director Detail :**

Title	PRESIDENT
Name	WIRTH, BRENDA
Address	1154 TOWN AND COUNTRY COMMONS DR
City-State-Zip:	TOWN AND COUNTRY MO 63017

Title	TREASURER
Name	FARRAR, SUZETTE
Address	1154 TOWN AND COUNTRY COMMONS DR
City-State-Zip:	TOWN AND COUNTRY MO 63017

Title	SECRETARY
Name	RUDLAND, ALISA
Address	1154 TOWN AND COUNTRY COMMONS DR SUITE 925
City-State-Zip:	TOWN AND COUNTRY MO 63017

Title	OFFICER
Name	BUTLER, BRENDA
Address	1154 TOWN AND COUNTRY COMMONS DR
City-State-Zip:	TOWN AND COUNTRY MO 63017

Title	OFFICER
Name	WILLEMANN, JULI
Address	1154 TOWN AND COUNTRY COMMONS DR
City-State-Zip:	TOWN AND COUNTRY MO 63017

I hereby 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 all other like empowered.

SIGNATURE: JULI WILLEMANN**EXEC DIRECTOR****01/08/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date