

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768755

Entity Name: TAU KAPPA EPSILON FRATERNITY, INC., OF FLORIDA STATE UNIVERSITY**FILED**
Apr 30, 2014
Secretary of State
CC3200759255**Current Principal Place of Business:**1939 HERITAGE GROVE CIRCLE
TALLAHASSEE, FL 32304**Current Mailing Address:**1408 N PIEDMONT WAY
TALLAHASSEE, FL 32308 US**FEI Number: 59-2346387****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**METZGER, KENNETH JESQ
1408 N PIEDMONT WAY
TALLAHASSEE, FL 32308 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	PD
Name	KELLAM, ROBERT E
Address	1521 BLOCKFORD CRT E.
City-State-Zip:	TALLAHASSEE FL 32317

Title	SD
Name	WILLIAM HOWARD
Address	2854 LARIS DR
City-State-Zip:	TALLAHASSEE FL 32303

Title	D
Name	MCCLOW, MARK W
Address	8146 CAYUGA TRL W
City-State-Zip:	JACKSONVILLE FL 32244

Title	VD
Name	IACINO, CLIFFORD J
Address	1771 SW 30TH PL
City-State-Zip:	FT. LAUDERDALE FL 33315

Title	D
Name	UTTER, KENNETH J
Address	134 ISLAND CIR
City-State-Zip:	SARASOTA FL 34242

Title	D
Name	DAVIS, RICHARD C
Address	206 TWELVE LEAGUE CIR.
City-State-Zip:	CASSELBERRY FL 32707

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: ROBERT E. KELLAM**PRESIDENT****04/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date