Current Mai	ling Address:			
7234 MARSI	H TERRACE			
PORT ST LL	JCIE, FL 34986 US			
FEI Number: 65-0136441			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
BACHELOR, JA				
7234 MARSH T	ERRACE E. FL 34986 US			
The above named	l entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Flori	da.
SIGNATURE: JANE L. BACHELOR				04/16/2015
	Electronic Signature of Registered Agent			Date
Officer/Dire	5 5 5			Date
Officer/Dire	5 5 5	Title	VP	Date
	ctor Detail :	Title Name	VP MONASTRA, ELIZABETH	Date
Title	ctor Detail :			Date
Title Name	Ctor Detail : P LOHAN, CINDY 703 SW KEATS AVENUE	Name	MONASTRA, ELIZABETH 4923 SW LAKE GROVE CIRCLE	Date
Title Name Address City-State-Zip:	Ctor Detail : P LOHAN, CINDY 703 SW KEATS AVENUE PALM CITY FL 34990	Name Address City-State-Zip:	MONASTRA, ELIZABETH 4923 SW LAKE GROVE CIRCLE PALM CITY FL 34990	Date
Title Name Address	Ctor Detail : P LOHAN, CINDY 703 SW KEATS AVENUE	Name Address City-State-Zip: Title	MONASTRA, ELIZABETH 4923 SW LAKE GROVE CIRCLE PALM CITY FL 34990 T	Date
Title Name Address City-State-Zip:	Ctor Detail : P LOHAN, CINDY 703 SW KEATS AVENUE PALM CITY FL 34990	Name Address City-State-Zip:	MONASTRA, ELIZABETH 4923 SW LAKE GROVE CIRCLE PALM CITY FL 34990	Date
Title Name Address City-State-Zip: Title	Ctor Detail : P LOHAN, CINDY 703 SW KEATS AVENUE PALM CITY FL 34990 S	Name Address City-State-Zip: Title	MONASTRA, ELIZABETH 4923 SW LAKE GROVE CIRCLE PALM CITY FL 34990 T	Date

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: JANE L. BACHELOR

PANHELLENIC TREASURER

04/16/2015

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010661

Entity Name: STUART AREA ALUMNAE PANHELLENIC ASSOC, INC.

Current Principal Place of Business:

7234 MARSH TERRACE PORT ST LUCIE, FL 34986

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FILED Apr 16, 2015 Secretary of State CC9650160070

Date