

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007059

FILED
Apr 15, 2019
Secretary of State
2066194793CC

Entity Name: ALUMNI CORPORATION OF THE SIGMA PHI EPSILON
FRATERNITY AT STETSON UNIVERSITY, INC.

Current Principal Place of Business:

421 N. WOODLAND BLVD.
UNIT 8243
DELAND, FL 32723

Current Mailing Address:

421 N. WOODLAND BLVD.
UNIT 8243
DELAND, FL 32723

FEI Number: 59-0991301

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIMM, REED
50 NORTH LAURA STREET
SUITE 3500
JACKSONVILLE, FL 32202 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: REED GRIMM

04/15/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name BRUNING, SAMUEL A
Address P.O. BOX 1562
City-State-Zip: STUART FL 34995

Title TREASURER, DIRECTOR
Name BRUMBACK, WESLEY W
Address 4593 OLD CARRIAGE TRAIL
City-State-Zip: OVIEDO FL 32765

Title VP, DIRECTOR
Name WIELAND, WILLIAM J
Address 2918 CLEMWOOD STREET
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name MORREALE, FRANK
Address 3017 OAK STREET
City-State-Zip: JACKSONVILLE FL 32205

Title DIRECTOR
Name HOWELL, CRAIG
Address 8395 RODEO DRIVE
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY, DIRECTOR
Name STAUTBERG, JOHN
Address 3000 BLACKBURN ST.
 APT 307
City-State-Zip: DALLAS TX 75204

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: SAMUEL A BRUNING

PRESIDENT

04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date