

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001846

Entity Name: SIGMA CHI 6100 SAN AMARO DRIVE CORP.**Current Principal Place of Business:**6100 SAN AMARO DR
CORAL GABLES, FL 33146**Current Mailing Address:**PO BOX 31-0963
MIAMI, FL 33231-0963**FEI Number:** 27-1991359**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOCKMAN, ERIC
2525 PONCE DE LEON BLVD.
SUITE 700
CORAL GABLES, FL 33134 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:** ERIC HOCKMAN

04/12/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	PERRY, PHILLIP
Address	3 GROVE CIRCLE
City-State-Zip:	E BRIDGEWATER MA 02333

Title	VP
Name	PENN, JEFF
Address	1239 MARSEILLE DR #105
City-State-Zip:	MIAMI BEACH FL 33141

Title	VP TECHNOLOGY AND COMMUNICATIONS
Name	PERRY, EDWARD
Address	11002 HAMMERLY BLVD UNIT 2
City-State-Zip:	HOUSTON TX 77043

Title	PRESIDENT
Name	MARIAN, CRAIG
Address	400 SOUTH POINTE DR #609
City-State-Zip:	MIAMI BEACH FL 33139

Title	TREASURER
Name	BIERMAN, DANIEL
Address	50 BISCAYNE BLVD APT 2905
City-State-Zip:	MIAMI FL 33132

Title	SECRETARY
Name	HOCKMAN, ERIC
Address	2525 PONCE DE LEON BLVD 700
City-State-Zip:	CORAL GABLES FL 33134

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: CRAIG MARIAN

PRESIDENT

04/12/2015

Electronic Signature of Signing Officer/Director Detail

Date