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.

TREASURER

SIGNATURE: LESTER GARCIA-CASARIEGO	
SIGNATURE. LESTER GARGIA-CASARIEGO	

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001482

Entity Name: THE GRADUATE ASSOCIATION OF PHI GAMMA DELTA AT FLORIDA INTERNATIONAL UNIVERSITY, INC.

Current Principal Place of Business:

EWM - RON SHUFFIELD 355 ALHAMBRA CIRCLE, SUITE 950 CORAL GABLES, FL 33134

Current Mailing Address:

EWM - RON SHUFFIELD 355 ALHAMBRA CIRCLE, SUITE 950 CORAL GABLES, FL 33134

FEI Number: 65-0689397

Name and Address of Current Registered Agent:

ROSS, JONATHAN 126 MENDOZA AVE APT 12 CORAL GABLES, FL 33134 US

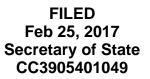
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

CHICOL/BIIO			
Title	PRESIDENT	Title	VP
Name	O'KURLEY, ASHLEY	Name	ROSS, JONATHAN
Address	575 CRANDON BLVD, APT 812	Address	126 MENDOZA AVE, APT 12
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	CORAL GABLES FL 33134
Title	TREASURER	Title	SECRETARY
Name	GARCIA-CASARIEGO, LESTER	Name	PINO, JAVIER
Address	7450 SW 165 TER	Address	1298 NW 141 AVE
City-State-Zip:	PALMETTO BAY FL 33157	City-State-Zip:	PEMBROKE PINES FL 33028
Title	DIRECTOR	Title	DIRECTOR
Name	PEREIRA, STEPHEN M JR.	Name	SHUFFIELD, RON
Address	10840 SW 240 LN	Address	9568 SW 67 COURT
City-State-Zip:	MIAMI FL 33032	City-State-Zip:	MIAMI FL 33156
Title	DIRECTOR		
Name	NAVAS, JOHN		
Address	2081 RENAISSANCE BLVD APT 304		
City-State-Zip:			



Certificate of Status Desired: No

02/25/2017

Date