

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005714

FILED
Feb 06, 2019
Secretary of State
5875793966CC

Entity Name: ALPHA CHI OMEGA NATIONAL HOUSING CORPORATION

Current Principal Place of Business:

5939 CASTLE CREEK PARKWAY N DR
INDIANAPOLIS, IN 46250-4343

Current Mailing Address:

5939 CASTLE CREEK PARKWAY N DR
INDIANAPOLIS, IN 46250-4343

FEI Number: 35-1992276

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PRESIDENT
Name GERHARDT, CASSIE
Address 5940 E. PRAIRIEWOOD DR
City-State-Zip: GRAND FORKS ND 58201

Title VP
Name HERNDON, LYNNE
Address 9879 GAYLORD DRIVE
 #804
City-State-Zip: HOUSTON TX 77024

Title SECRETARY
Name SNEDEKER, ALICE
Address 1075 PEACHTREE ST NE
 SUITE 2000
City-State-Zip: ATLANTA GA 30309

Title DIRECTOR
Name IRONMONGER, MOLLY
Address 7320 MAR DEL DRIVE
City-State-Zip: MADEIRA OH 45243

Title SENIOR FINANCIAL CONTROLLER
Name JOHNSON, TIM
Address 5939 CASTLE CREEK PARKWAY N
 DRIVE
City-State-Zip: INDIANAPOLIS IN 46250

Title DIRECTOR
Name DUROCHER, DANIELLE
Address 12315 WESTMERE DRIVE
City-State-Zip: HOUSTON TX 77077

Title DIRECTOR
Name KLINGE, DONNA
Address 2034 HAWLEY DRIVE
City-State-Zip: VISTA CA 92084

Title DIRECTOR
Name CROTTY, JENNIFER
Address 74 WATER STREET
City-State-Zip: SAUGUS MA 01906

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: TIM JOHNSON

**SENIOR FINANCIAL
CONTROLLER**

02/06/2019

Electronic Signature of Signing Officer/Director Detail

Date