

2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002806

Entity Name: ALPHA EPSILON PI FRATERNITY, INC.**Current Principal Place of Business:**8815 WESLEYAN ROAD
INDIANAPOLIS, IN 46268**Current Mailing Address:**8815 WESLEYAN ROAD
INDIANAPOLIS, IN 46268 US**FEI Number:** 43-0769468**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST., SUITE 4
TALLAHASSEE, FL 32301 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	SUPREME MASTER
Name	JACOBSON, JEFFREY H.
Address	8815 WESLEYAN ROAD
City-State-Zip:	INDIANAPOLIS IN 46268

Title	SUPREME MASTER-ELECT
Name	OSHINS, JASON
Address	8815 WESLEYAN ROAD
City-State-Zip:	INDIANAPOLIS IN 46268

Title	SUPREME SCRIBE
Name	KNAPP, SCOTT A
Address	8815 WESLEYAN ROAD
City-State-Zip:	INDIANAPOLIS IN 46268

Title	EXECUTIVE DIRECTOR
Name	FLEISCHER, JAMES
Address	8815 WESLEYAN ROAD
City-State-Zip:	INDIANAPOLIS IN 46268

Title	SUPREME EXCHEQUER
Name	FARBMAN, ERIC I.
Address	8815 WESLEYAN ROAD
City-State-Zip:	INDIANAPOLIS IN 46268

Title	SUPREME SENTINEL
Name	COHEN, ADAM F.
Address	8815 WESLEYAN ROAD
City-State-Zip:	INDIANAPOLIS IN 46268

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: JAMES FLEISCHER**EXECUTIVE DIRECTOR****04/28/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date