

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709843

FILED  
Feb 23, 2006  
Secretary of State

**Entity Name:** ZETA RHO HOUSE CORPORATION OF LAMBDA CHI ALPHA, INC.

**Current Principal Place of Business:**

215 S MONROE ST STE 400  
P O DRAWER 11300  
TALLAHASSEE, FL 32302

**New Principal Place of Business:**

**Current Mailing Address:**

215 S MONROE ST STE 400  
P O DRAWER 11300  
TALLAHASSEE, FL 32302

**New Mailing Address:**

FEI Number: 59-2849770      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANNHEIMER, DOUGLAS L  
215 S MONROE ST  
STE 400  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: REINHARD, DON,  
Address: P.O. BOX 1794  
City-St-Zip: TALLAHASSEE, FL 32302

Title: PD ( ) Delete  
Name: MANNHEIMER, DOUG,  
Address: 3975 BOBBIN BROOK CIR.  
City-St-Zip: TALLAHASSEE, FL 32312

Title: VC/D ( ) Delete  
Name: RUBINAS, WAYNE  
Address: 607 E 6TH AVE  
City-St-Zip: TALLAHASSEE, FL 32303

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: STD (X) Change ( ) Addition  
Name: GUEMPLE, RANDY  
Address: 293 THORNBERG DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DOUG MANNHEIMER

PD

02/23/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date