2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 720176

1. Entity Name
HOUSE CORPORATION OF BETA IOTA CHAPTER OF PHI KAPPA TAU NATIONAL FRATERNITY, INC.

Principal Place of Business	Mailing Address
1900 HERITAGE GROVE CIR TALLAHASSEE, FL 32304 US	738 BRANDEIS AVENUE PANAMA CITY, FL 32405 US

DO NOT WRITE IN THIS SPACE

03282006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-0670487
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CURINGTON, GERALD
2117 LAROCHELLE DR
TALLAHASSEE, FL 32308

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CARTER, JOHN H
STREET ADDRESS	738 BRANDEIS AVE.
CITY-ST-ZIP	PANAMA CITY, FL 32405
TITLE	TD
NAME	LARKIN, ROBERT
STREET ADDRESS	906 N.MONROE ST.
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	SD
NAME	LAX, WILLIAM
STREET ADDRESS	901 BARRIE AVE
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	VPD
NAME	BENDER, JOHN
STREET ADDRESS	2628 SARAWOOD LANE
CITY-ST-ZIP	TALLAHASSEE, FL 32309
TITLE	D
NAME	ZAPPITELLI, NICHOLAS
STREET ADDRESS	1900 HEREITAGE GROVE CIR APT 131
CITY-ST-ZIP	TALLAHASSEE, FL 32304
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/13/06-80071-017 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John H. Carter JOHN H. CARTER 3-28-06 8507478866
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #