

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 22, 2007
Secretary of State**

DOCUMENT# 729014

Entity Name: THE ETA IOTA HOUSE CORPORATION OF THE SIGMA CHI INTERNATIONAL FRATERNITY, INC.

Current Principal Place of Business:

9121 BREWSTERS DR
ANCHORAGE, AK 99516

New Principal Place of Business:

Current Mailing Address:

9121 BREWSTERS DR
ANCHORAGE, AK 99516

New Mailing Address:

FEI Number: 81-0593541 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRASER, DAVE
392 MUDDY CREEK LANE
ORMOND BEACH, FL 32174 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: P () Delete
Name: AHRENS, JAMES
Address: 12301 KERNAN FOREST BLVD #401
City-St-Zip: JACKSONVILLE, FL 32225

Title: V () Delete
Name: PATTERSON, JAMES
Address: 21 SUNSHINE BLVD
City-St-Zip: ORMOND BEACH, FL 32174

Title: T () Delete
Name: DOWNS, SETH H
Address: 9121 BREWSTERS DR
City-St-Zip: ANCHORAGE, AK 99516

Title: S () Delete
Name: MILLER, BRETT
Address: 1307 DEXTER DR WEST
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SETH DOWNS

T

01/22/2007

Electronic Signature of Signing Officer or Director

Date