

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733514

FILED
Apr 29, 2009
Secretary of State

Entity Name: EPSILON ZETA OF SIGMA CHI, INC.

Current Principal Place of Business:

1415 E PIEDMONT DR
SUITE 4
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 12246
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-0447428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENTON, RICHARD E
1415 E PIEDMONT DRIVE
SUITE 4
TALLAHASSEE, FL 32312 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: JENKINS, SCOTT
Address: 1001 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: S () Delete
Name: BENTON, RICHARD E
Address: 1415 E PIEDMONT DR STE 4
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: TAGGERT, MICHAEL F
Address: 6863 BUCK LAKE ROAD
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: THOMAS, MICHAEL J
Address: 215 S MONROE ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: KIKER, JACK E III
Address: PO BOX 4128
City-St-Zip: TALLAHASSEE, FL 32315

Title: D () Delete
Name: PHELPS, RAY
Address: 7025 HANGING VINE WAY
City-St-Zip: TALLAHASSEE, FL 32317

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
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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 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: RICHARD E. BENTON

MR.

04/29/2009

Electronic Signature of Signing Officer or Director

Date