

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737766

FILED
Apr 29, 2009
Secretary of State

Entity Name: DELTA UPSILON ALUMNI CLUB, INC.

Current Principal Place of Business:

C/O PAUL E ROSENTHAL
111 N ORANGE AVE #1800
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

C/O PAUL E ROSENTHAL
111 N ORANGE AVE #1800
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-2192339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENTHAL, PAUL
111 N ORANGE AVE #1800
ORLANDO, FL 32801 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: PD () Delete
Name: FINNEGAN, TROY
Address: 1806 NEBRASKA STREET
City-St-Zip: ORLANDO, FL 32803

Title: SD () Delete
Name: ROSENTHAL, PAUL E.
Address: 111 N ORANGE AVE 18 FLR
City-St-Zip: ORLANDO, FL

Title: VD () Delete
Name: SULLIVAN, PATRICK
Address: 4334 BEAU RONAGE CIR
City-St-Zip: LUTZ, FL 33558

Title: D () Delete
Name: STOCKHAMMER, STAN
Address: 24 SHADOW CREEK WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD () Delete
Name: NEWTON, JOHN
Address: PO BOX 428
City-St-Zip: MELBOURNE, FL 32902

Title: D () Delete
Name: ALLENDE, PETER
Address: 1894 SW 23RD STREET
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: ROSENTHAL, PAUL E.
Address: 111 N ORANGE AVE 18 FLR
City-St-Zip: ORLANDO, FL 32801

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: D (X) Change () Addition
Name: ALLENDE, PETER
Address: 780 NE 69 ST #1402
City-St-Zip: MIAMI, FL 33138

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: PAUL E ROSENTHAL

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04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date