

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 739293

**FILED**  
**Oct 09, 2013**  
**Secretary of State**

**Entity Name:** DELTA KAPPA CHAPTER OF DELTA PHI EPSILON HOUSE CORPORATION

**Current Principal Place of Business:**

1115 SW 9TH AVE  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

**Current Mailing Address:**

251 S. CAMAC STREET  
PHILADELPHIA, PA 19107 US

**New Mailing Address:**

**FEI Number:** 59-0747893

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORALES, ANA  
2650 SW 37TH AVENUE  
APT. 407  
COCONUT GROVE, FL 33133 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:** ANA MORALES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** SD  
**Name:** DEFEO, NICOLE  
**Address:** 251 SOUTH CAMAC STREET  
**City-St-Zip:** PHILADELPHIA, PA 19107

**Title:** TD  
**Name:** HEILVEIL, BARBARA  
**Address:** 2665 ASPEN ROAD  
**City-St-Zip:** ANN ARBOR, MI 48108

**Title:** D  
**Name:** HART-ESPOSITO, NANCY  
**Address:** 55 WAGON WHEEL DRIVE  
**City-St-Zip:** SICKLERVILLE, NJ 08081

I hereby 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 all other like empowered.

**SIGNATURE:** NICOLE DEFEO

SD

10/09/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date