2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756843

FILED Jan 15, 2010 Secretary of State

Entity Name: CAPITOL CITY HOUSEHOLDING CORPORATION OF SIGMA PHI EPSILON

Current Principal Place of Business: New Principal Place of Business:

1936 HERITAGE GROVE CIRCLE 215 E. THARPE ST

TALLAHASSEE, FL 32304 US TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

P O BOX 10268

TALLAHASSEE, FL 32302 US

FEI Number: 52-1240641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MADIGAN, TERRELL C 215 E. THARPE ST

TALLAHASSEE, FL 32303 US

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

Name: MADIGAN, TERRELL C
Address: POST OFFICE BOX 10321
City-St-Zip: TALLAHASSEE, FL 32302

Title: D

Name: HEMPHILL, DEARL

Address: 215 S. MONROE STREET, THIRD FLOOR

City-St-Zip: TALLAHASSEE, FL 32301

Title: TD

Name: NORMAN, DAVID W Address: 2621 NOBLE DR

City-St-Zip: TALLAHASSEE, FL 32308

Title:

Name: MORRIS, KEN

Address: 4000 BOTHWELL TERRACE City-St-Zip: TALLAHASSEE, FL 32317

Title:

Name: GRIGBY, THOMAS J
Address: 2144 HEATHROW ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title:

 Name:
 SHARP, LAWRENCE J

 Address:
 2518 BLARNEY DR

 City-St-Zip:
 TALLAHASSEE, FL 32309

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: DAVID NORMAN TD 01/15/2010