

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757491

FILED
Apr 27, 2012
Secretary of State

Entity Name: GAMMA OF CHI OMEGA HOUSE CORPORATION, INC.

Current Principal Place of Business:

661 W JEFFERSON STREET
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

3506 LIMERICK DR.
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 59-2101970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKS, SUSAN
316 S.BAYLEN ST.SUITE 500
PENSACOLA, FL 32502 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
Name: STEWART, GILLIAN
Address: 3730 BOBBIN BROOK CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP
Name: DAHNKE, MICHELLE
Address: 2965 SHAMROCK ST N APT. F23
City-St-Zip: TALLAHASSEE, FL 32309

Title: D
Name: MANIFOLD, LEA
Address: 3506 LIMERICK DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: TR
Name: VANLANDINGHAM, SOMER
Address: 1594 APPLEWOOD WAY
City-St-Zip: TALLAHASSEE, FL 32312

Title: SEC
Name: SOBOL, SHELLY
Address: 449 HIGH POINT LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: MEWBORNE, ALISON
Address: 1677 COPPERFIELD CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

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: LEA MANIFOLD

D

04/27/2012

Electronic Signature of Signing Officer or Director

Date