

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766721

FILED
May 27, 2005
Secretary of State

Entity Name: THE FLORIDA FEDERATION OF ALPHA CHAPTERS, INC.

Current Principal Place of Business:

890 HILL ROOST ROAD
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

890 HILL ROOST ROAD
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: 59-3125320 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CRUMEL, JAMES L
890 HILL ROOST ROAD
TALLAHASSEE, FL 32312 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: D () Delete
Name: ELLIS, JOHN
Address: 1302 E. ROBINSON STREET
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: GODFREY, LENOX
Address: 900 BROWARD RD. APT. #17
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD () Delete
Name: HARRIS, GREG
Address: 2364 RYAN PLACE
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD () Delete
Name: CRUMEL, JAMES
Address: 890 HILL ROOST RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: PD () Delete
Name: MCCRAY, CHRISTOPHER
Address: 5632 PARTRIDGE DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: PD () Delete
Name: NORWOOD, MICHAEL
Address: 5713 DESCARTES CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33457

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
Name:
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 for the exemption stated in Section 119.07(3)(i), 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: JAMES CRUMEL

TD

05/27/2005

Electronic Signature of Signing Officer or Director

Date