

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002989

FILED
Jan 10, 2007
Secretary of State

Entity Name: DELTA DELTA DELTA NATIONAL HOUSE CORPORATION-UNIVERSITY OF FLORIDA (ALPHA PSI)

Current Principal Place of Business:

2331 BROOKHOLLOW PLAZA DR.
ARLINGTON, TX 76006 US

New Principal Place of Business:

Current Mailing Address:

2331 BROOKHOLLOW PLAZA DR.
ARLINGTON, TX 76006 US

New Mailing Address:

FEI Number: 75-2483083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D () Delete
Name: FLYNN, CHRISTINA
Address: 18419 91ST PL W
City-St-Zip: EDMONDS, WA 98026

Title: VP () Delete
Name: HORNER, KRISTIN A
Address: 35980 MICHAEL DR.
City-St-Zip: SOLON, OH 44139

Title: D () Delete
Name: CLARK, JACKYE
Address: 7510 SHARON LEE DRIVE
City-St-Zip: ARLINGTON, TX 76001

Title: P () Delete
Name: SHIMBERG, MICHELLE
Address: 3212 W FOUNTAIN BLVD
City-St-Zip: TAMPA, FL 33609

Title: S (X) Delete
Name: COOK, CARI F
Address: 2331 BROOKHOLLOW PLAZA DR.
City-St-Zip: ARLINGTON, TX 76006

Title: D (X) Delete
Name: RIEGL, LUANN
Address: 127 LEWISVILLE CT.
City-St-Zip: PHOENIXVILLE, PA 19460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLYNN, CHRISTINA
Address: 18419 91ST PL W
City-St-Zip: EDMONDS, WA 98026

Title: VP (X) Change () Addition
Name: BAUGHMAN, JOANNE
Address: 628 CHESTNUT CT
City-St-Zip: BARTLESVILLE, OK 74003

Title: D (X) Change () Addition
Name: MURER, MARGUERITE
Address: 501 KNOX PL
City-St-Zip: JOILET, IL 60435

Title: S (X) Change () Addition
Name: COOK, CARI F
Address: 2331 BROOKHOLLOW PLAZA DR.
City-St-Zip: ARLINGTON, TX 76006

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 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: CARI F. COOK

S

01/10/2007

Electronic Signature of Signing Officer or Director

Date