

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 16, 2008
Secretary of State**

DOCUMENT# F95000002989

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:

PO BOX 5987
ARLINGTON, TX 76005 US

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

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

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

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

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:

I hereby certify that the information supplied with this filing does not qualify 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

SEC

01/16/2008

Electronic Signature of Signing Officer or Director

_____ Date