

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002196

FILED
May 01, 2005
Secretary of State

Entity Name: GAMMA CHI CHAPTER INCORPORATED OF PHI SIGMA PI NATIONAL HONOR FRATERNITY

Current Principal Place of Business:

PO BOX 621795
OVIEDO, FL 32762

New Principal Place of Business:

Current Mailing Address:

PO BOX 621795
OVIEDO, FL 32762

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

MCCORMACK, MONICA
1341 NORTHGATE CIR #201
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

PATEL, MONICA
1398 NORTHGATE CIR 202
OVIEDO, FL 32765 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: HEMITA PATEL

05/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: YANKOWICH, ASHLEY
Address: 307 WILD OLIVE LANE
City-St-Zip: LONGWOOD, FL 32779 US

Title: C () Delete
Name: EINHORN, LAUREN
Address: 9530 NW 20 PLACE
City-St-Zip: FORT LAUDERDALE, FL 33322 US

Title: CD () Delete
Name: RAPPAPORT, RACHEL
Address: 3733 N GOLDENROD RD APT 813
City-St-Zip: WINTER PARK, FL 32792 US

Title: C () Delete
Name: PAYNE, THERESA
Address: 912 RIVER RAPIDS AVE
City-St-Zip: BRANDON, FL 33511 US

Title: C (X) Delete
Name: ANGELOU, LEILA
Address: 12153 KINGS KNIGHT WAY #203
City-St-Zip: ORLANDO, FL 32817 US

Title: TD (X) Delete
Name: HOSKINS, EMILY
Address: 10849 HEATHER RIDGE CIR APT 208
City-St-Zip: ORLANDO, FL 32817 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PATEL, HEMITA
Address: 1398 NORTHGATE CIRCLE APT 202
City-St-Zip: OVIEDO, FL 32765 US

Title: TD (X) Change () Addition
Name: EVAN, MOLNAR
Address: 176 RESERVE CIRCLE APT 208
City-St-Zip: OVIEDO, FL 32765 US

Title: H (X) Change () Addition
Name: SHELDON, ALLIE
Address: 4491 DIAMOND CIRCLE EAST
City-St-Zip: SARASOTA, FL 34233 US

Title: RA (X) Change () Addition
Name: PAYNE, THERESA
Address: 912 RIVER RAPIDS AVE
City-St-Zip: BRANDON, FL 33511 US

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: HEMITA PATEL

PD

05/01/2005

Electronic Signature of Signing Officer or Director

Date