

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005981

FILED  
Mar 06, 2010  
Secretary of State

**Entity Name:** USF DELTA CHI HOUSING CORPORATION

**Current Principal Place of Business:**

C/O MARIO PETRUZZELLI  
1234 RAINBOW CIRCLE  
VALRICO, FL 33594

**New Principal Place of Business:**

C/O RUSS DRISCOLL  
2610 HOLLINGTON OAKS PLACE  
BRANDON, FL 33511

**Current Mailing Address:**

C/O RAYMOND M. BLACKLIDGE  
28810 FALLING LEAVES WAY  
WESLEY CHAPEL, FL 335435761

**New Mailing Address:**

C/O RUSS DRISCOLL  
2610 HOLLINGTON OAKS PLACE  
BRANDON, FL 33511

**FEI Number:** 59-3754483

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BLACKLIDGE, RAYMOND M  
28810 FALLING LEAVES WAY  
WESLEY CHAPEL, FL 335435761 US

**Name and Address of New Registered Agent:**

SANCHEZ, GILBERTO E  
114 S. FREMONT AVE  
TAMPA, FL 33606 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: GILBERTO E SANCHEZ

03/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: RAAD, THOMAS  
Address: 10914 OBSERVATORY WAY  
City-St-Zip: TAMPA, FL 33647

Title: DS  
Name: DUNDAS, BENJAMIN D  
Address: 13004 NATIONAL DR. APT B  
City-St-Zip: TAMPA, FL 33617

Title: DT  
Name: DRISCOLL, RUSSELL H  
Address: 2610 HOLLINGTON OAKS PLACE  
City-St-Zip: BRANDON, FL 33511

Title: D  
Name: ORETA, ALEXIS V  
Address: 1557 WATSON OAKS CT.  
City-St-Zip: LAKE LAND, FL 33809

Title: D  
Name: SANCHEZ, GILBERTO E  
Address: 114 S. FREMONT AVE  
City-St-Zip: TAMPA, FL 33606

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: BENJAMIN D DUNDAS

DS

03/06/2010

Electronic Signature of Signing Officer or Director

Date