

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001844

FILED
Apr 11, 2007
Secretary of State

Entity Name: NATIONAL PAN-HELLENIC COUNCIL, INC.

Current Principal Place of Business:

3951 DRAPLINGER PKWY
SUITE 218
DECATUR, GA 30035

New Principal Place of Business:

3951 SNAPPFINGER PKWY
SUITE 218
DECATUR, GA 30035

Current Mailing Address:

3951 DRAPLINGER PKWY
SUITE 218
DECATUR, GA 30035

New Mailing Address:

3951 SNAPPFINGER PKWY
SUITE 218
DECATUR, GA 30035

FEI Number: 52-1730952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWIE, MICHAEL V
100 NORMAN HALL
P O BOX 117045
GAINESVILLE, FL 326117045 US

Name and Address of New Registered Agent:

BOWIE, MICHAEL V
G415 NORMAN HALL
GAINESVILLE, FL 326117045 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:

04/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BOWIE, MICHAEL V
Address: G415 NORMAN HALL PO BOX 1107045
City-St-Zip: GAINESVILLE, FL 326117045

Title: VP () Delete
Name: JONES, JENNIFER
Address: SMJ BOX 0355
City-St-Zip: DALLAS, TX 75275

Title: VP () Delete
Name: DARIUS, JESSE
Address: PO BOX 994
City-St-Zip: BIRMINGHAM, AL 35201

Title: SD () Delete
Name: JONES, DONNA
Address: 777 W GERMANTOWN PIKE, APT 910
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: TREA () Delete
Name: POOLE, JON
Address: 214 FIFTH AVE STE H204
City-St-Zip: NEW YORK, NY 1000-7604

Title: IPP () Delete
Name: BLACK, CASSANDRA
Address: PO BOX 224404
City-St-Zip: DALLAS, TX 752224404

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 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: JON POOLE

TREA

04/11/2007

Electronic Signature of Signing Officer or Director

Date