

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90093 010 ****61.25

DOCUMENT # N02000005941

1. Entity Name

NU ETA LAMBDA CHAPTER OF ALPHA PHI ALPHA
FRATERNITY, INC.



Principal Place of Business

PO BOX 178
GAINESVILLE FL 32601

Mailing Address

PO BOX 178
GAINESVILLE FL 32601

24007291

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Gainesville FL

City & State

Gainesville FL

Zip

32602

Country

Alachua

Zip

32602

Country

Alachua

4. FEI Number

52-2371916

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, DARRELL W SR.
3611 SE 29 BLVD
GAINESVILLE FL 32641

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Darrell W. Johnson Sr.

Darrell W. Johnson Sr.

1-26-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DP
NAME CLARKE, BRIAN ☒ Delete
STREET ADDRESS 1505 FT CLARKE BLVD APT 18308
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE DV
NAME MCKNIGHT, RAYMOND ☒ Delete
STREET ADDRESS 6206 NW 81 DR
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE DS
NAME IVEY, MARLON ☒ Delete
STREET ADDRESS 13768 CR 132
CITY-ST-ZIP LIVE OAK FL 32060

TITLE DT
NAME JOHNSON, DARRELL W SR. ☐ Delete
STREET ADDRESS 3611 SE 29 BLVD
CITY-ST-ZIP GAINESVILLE FL 32641

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP ☒ Change ☒ Addition
NAME MCKnight, Raymond
STREET ADDRESS 6206 N.W. 81st Drive
CITY-ST-ZIP Gainesville, FL 32653

TITLE DV ☒ Change ☐ Addition
NAME Ivey, Marlon
STREET ADDRESS 13768 C.R. 132
CITY-ST-ZIP Live Oak, FL 32060

TITLE DS ☒ Change ☒ Addition
NAME Greene, Chandan
STREET ADDRESS 3810 N.E. 13th Street
CITY-ST-ZIP Gainesville, FL 32609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Darrell W. Johnson Sr.

Darrell W. Johnson Sr.

1-26-04

352-258-1940

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #