

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 28, 2004
Secretary of State**

DOCUMENT# N02000008753

Entity Name: PI LAMBDA PHI HOUSING CORPORATION OF TALLAHASSEE

Current Principal Place of Business:

2225 AMELIA CIR
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

2225 AMELIA CIR
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 20-0081501 FEI Number Applied For () FEI Number Not Applicable () 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:

KOELEMIJ, KEVIN J
2225 AMELIA CIR
TALLAHASSEE, FL 32304 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: DP () Delete
Name: SFUGARAS, DREW
Address: 905 SUMMIT DR N
City-St-Zip: ATLANTA, GA 30324

Title: DV () Delete
Name: RUSSO, GIOVANNI
Address: 931 VILLAGE BLVD STE 905229
City-St-Zip: W PALM BCH, FL 33409

Title: DV () Delete
Name: COHEN, LEE P
Address: 520 SE 5TH AVE STE 2311
City-St-Zip: FT LAUDERDALE, FL 33301

Title: DT () Delete
Name: DONATO, KORY
Address: 8143 NW 14TH ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DS () Delete
Name: ESCARRA, GREGORY M
Address: 1848 INY LN STE 15
City-St-Zip: TALLAHASSEE, FL 32304

Title: EVP () Delete
Name: KOELEMIJ, KEVIN
Address: 2225 AMELIA CIR
City-St-Zip: TALLAHASSEE, FL 32304

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 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: KEVIN J. KOELEMIJ

EVP

10/28/2004

Electronic Signature of Signing Officer or Director

Date