

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N02000008753

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