

Feb 14 05 12:09p

Malcolm R. Leonard, CPA

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FILED
Apr 01, 2005 8:00 am
Secretary of State

02-18-2005 90048 033 ****61.25

**2005 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # N04000001498			
1. Entity Name ALPHA PHI SIGMA INC			
Principal Place of Business 20558 NE 8 CT MIAMI, FL 33179		Mailing Address 20558 NE 8 CT MIAMI, FL 33179	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
02142005 Chg-NP		CP2E037 (10/03)	
A. FE Number 31-1009680		Applied For Not Applicable	
B. Certificate of Status Desired ☐		S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHEARN, REGINA 20558 NE 8 CT MIAMI, FL 33179		7. Name and Address of New Registered Agent 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 _____			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information furnished with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information reflected 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. This I am an officer or director of this 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 the enclosed.			
SIGNATURE: <u>REGINA SHEARN</u> Executive Director 02/15/05 954 262-9004			