

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N07138

1. Entity Name

EPSILON TAU HOUSE CORPORATION OF DELTA GAMMA FRATERNITY

05-25-2002 90092.041 ****61.25

SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 NOV 18 AM 8:01

Principal Place of Business

Mailing Address

3250 RIVERSIDE DRIVE
P. O. BOX 21397
COLUMBUS OH 43221-0397
US

3250 RIVERSIDE DRIVE
P. O. BOX 21397
COLUMBUS OH 43221-7397

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2547858

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

SAMPSON, PATRICIA B
564 PLEASANT GROVE DRIVE
WINTER SPRINGS FL 32708

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.

SIGNATURE

Patricia B. Sampson, House Corp. President

Patricia B. Sampson

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VANDER WEIDE, MELISSA A 5781 GATLIN AVE #518 ORLANDO FL 32822	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RICHARDSON, AMY 1321 MAGNOLIA AVE WINTER PARK FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC COKER, CAROL 3250 RIVERSIDE DR. COLUMBUS OH 43221	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Patricia B. Sampson House Corporation President 564 Pleasant Grove Dr. Winter Springs, FL 32708	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Maria Crawford House Corp Secretary 376 Woodbury Pines Cir. Orlando, FL 32828	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

Patricia B. Sampson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02 407-359-3883

Date

Daytime Phone #

CR2E037 (9/01)