

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001737

FILED  
Mar 28, 2012  
Secretary of State

**Entity Name:** SIGMA CHI FRATERNITY - LAMBA ZETA CHAPTER INC.

**Current Principal Place of Business:**

SU 215 FGCU 10501 FGCU BLVD  
S. FT MYERS, FL 33965

**New Principal Place of Business:**

**Current Mailing Address:**

SIGMA CHI FRATERNITY  
SU 215 10501 FGRU BLVD  
S FT MYERS, FL 33965

**New Mailing Address:**

**FEI Number:** 30-0518150

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FISHER, DAVID E SR  
4661 5TH AVE S.W.  
NAPLES, FL 34119 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: PRES  
Name: TIENSTRA, GARRET  
Address: SU 215 FGCU 10501 FGCU BLVD  
City-St-Zip: S. FT MYERS, FL 33965 US

Title: VP  
Name: ELY, BRENT  
Address: SU 215 FGCU 10501 FGCU BLVD  
City-St-Zip: S FT MYERS, FL 33965 US

Title: ADVC  
Name: CLAPPER, JEFF  
Address: SU 215 FGCU 10501 FGCU BLVD  
City-St-Zip: S. FT MYERS, FL 33965 US

Title: DIR  
Name: FISHER, DAVID E  
Address: 4661 5TH AVE S.W.  
City-St-Zip: NAPLES, FL 34119

I hereby 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 all other like empowered.

SIGNATURE: DAVID E. FISHER

DIR

03/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date