

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009807

FILED
May 04, 2010
Secretary of State

Entity Name: PHI SIGMA OF PHI GAMMA DELTA FOUNDATION, INC.

Current Principal Place of Business:

447 WEST COLLEGE AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

2740 W. THARPE ST.
307
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 27-1088008 **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:

Name and Address of New Registered Agent:

POWER, EVAN J
2740 W. THARPE STREET
307
TALLAHASSEE, FL 32303 US

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: PD
Name: POWER, EVAN J
Address: 2740 W. THARPE ST. #307
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD
Name: KLEPPER, ROB
Address: 2040 OWENBY COURT
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: SPENCER, CHRISTOPHER M
Address: 447 W. COLLEGE AVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: STOPPI, DAVID
Address: 447 W. COLLEGE AVE.
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: CREW, JEFF
Address: 8107 TENNYSON DR
City-St-Zip: TALLAHASSEE, FL 32309

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: EVAN J. POWER

PD

05/04/2010

Electronic Signature of Signing Officer or Director

Date