

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010828

FILED  
Feb 07, 2012  
Secretary of State

**Entity Name:** TAU KAPPA EPSILON FRATERNITY, INC. OF THE UNIVERSITY OF WEST FLORIDA

**Current Principal Place of Business:**

11000 UNIVERSITY PKWY BLDG 22 RM. 245  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

2467 INTERSTATE CIR  
PENSACOLA, FL 32526

**New Mailing Address:**

6330 MULDOON ROAD  
PENSACOLA, FL 32526

**FEI Number:** 27-3687962

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, CHRISTOPHER M  
2467 INTERSTATE CIRCLE  
PENSACOLA, FL 32526 US

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

WILLIAMS, CHRISTOPHER M  
6330 MULDOON ROAD  
PENSACOLA, FL 32526 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:

02/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DC  
Name: WILLIAMS, CHRISTOPHER M  
Address: 6330 MULDOON ROAD  
City-St-Zip: PENSACOLA, FL 32526

Title: DVC  
Name: STUBBS, ETHAN M II  
Address: 537 PATTERSON OFFICE TOWER  
City-St-Zip: LEXINGTON, KY 40506

Title: D  
Name: RICHARDS, JASON L  
Address: 571 BOBWHITE DR  
City-St-Zip: PENSACOLA, FL 32514

Title: D  
Name: DAVIS, MATTHEW G  
Address: 8218 CAMPFLOWERS RD  
City-St-Zip: YOUNGTOWN, FL 32466

Title: P  
Name: TAYLOR, MATTHEW C  
Address: 10163 VIXEN PLACE  
City-St-Zip: PENSACOLA, FL 32514

Title: P  
Name: EPSTIEN, SETH  
Address: 11000 UNIVERSITY PKWY BLDG 22 RM. 245  
City-St-Zip: PENSACOLA, FL 32514

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: CHRISTOPHER MICHAEL WILLIAMS

DC

02/07/2012

Electronic Signature of Signing Officer or Director

Date