

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2005
Secretary of State

DOCUMENT# N19936

Entity Name: CHI OMEGA HOUSING CORPORATION

Current Principal Place of Business:

807 W. PANHELLENIC
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

1503 NW 52ND TERR
GAINESVILLE, FL 32605 US

New Mailing Address:

P.O. BOX 358614
GAINESVILLE, FL 32635-861 US

FEI Number: 59-6135388 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:

OSMUN, MARTHA W
1503 NW 52ND TERR
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

OSMUN, MARTHA W
6005 NW 19TH PLACE
GAINESVILLE, FL 32605 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

07/11/2005

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: OLIVER, TRUITT
Address: 329 NW 22 ST
City-St-Zip: GAINESVILLE, FL 32603

Title: PD () Delete
Name: OLINGER, SANDRA
Address: 4914 SW 95 TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: SD () Delete
Name: ROWE, JENNIFER
Address: 4824 SW 91ST CT
City-St-Zip: GAINESVILLE, FL 32608

Title: TD () Delete
Name: ALSOBROOKE, ELIZABETH
Address: 6621 NW 50TH LN
City-St-Zip: GAINESVILLE, FL 32653

Title: A () Delete
Name: OSMUN, MARTHA W
Address: 1503 NW 52 TERRACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: DUNLAP, LURAL
Address: 600 SW 23RD PLACE
City-St-Zip: GAINESVILLE, FL 32601

Title: PD (X) Change () Addition
Name: OLIVER, TRUITT
Address: 529 NW 22 ST
City-St-Zip: GAINESVILLE, FL 32603

Title: SD (X) Change () Addition
Name: CANNON, ALISON
Address: 403 NE 6TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601

Title: TD (X) Change () Addition
Name: ROSSI, DEB
Address: P.O. BOX 112750
City-St-Zip: GAINESVILLE, FL 32611

Title: A (X) Change () Addition
Name: OSMUN, MARTHA W
Address: 6005 NW 19TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARTHA W. OSMUN

Electronic Signature of Signing Officer or Director

A

07/11/2005

Date