

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2007 8:00 am**  
**Secretary of State**

04-04-2007 90170 013 \*\*\*\*61.25

**DOCUMENT # N21288**

1. Entity Name  
PHI DELTA THETA ALUMNI CLUB OF THE FORT  
LAUDERDALE, FLORIDA AREA, INC.



Principal Place of Business  
C/O MICHAEL D. STEWART  
1512 E. BROWARD BLVD., SUITE 200  
FORT LAUDERDALE, FL 33301

Mailing Address  
C/O MICHAEL D. STEWART  
1512 E. BROWARD BLVD., SUITE 200  
FORT LAUDERDALE, FL 33301

40049638



2. Principal Place of Business - No P.O. Box #  
6550 North Federal Hwy  
Suite, Apt. #, etc.  
Suite 200

3. Mailing Address  
6550 N. Federal Hwy  
Suite, Apt. #, etc.  
Suite 200

City & State  
Fort Lauderdale, FL

City & State  
Fort Lauderdale, FL

Zip  
33308

Country  
US

Zip  
33308

Country  
US

01232007 Chg-NP CR2E037 (12/06)

4. FEI Number  
65-0002774

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

STEWART, MICHAEL D  
1512 E. BROWARD BLVD.  
SUITE 200  
FORT LAUDERDALE, FL 33301

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6550 North Federal Hwy

Suite 200

City

Fort Lauderdale

FL

Zip Code  
33308

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to**  
**Florida Department of State**

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
DOERING, RALPH H III  
721 NE 3RD AVENUE  
FORT LAUDERDALE, FL 33304 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
CASEY, DEWITT  
8333 WEST MCNAB ROAD #125  
POMPANO BEACH, FL 33321 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
MEEHAN, JAMIE  
901 E. LAS OLAS BLVD #101  
FORT LAUDERDALE, FL 33301 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
SCHAEFFER, DONALD D DR.  
451 HERITAGE DRIVE #1003  
POMPANO BEACH, FL 33060 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DOERING, JOHN C  
2431 E LAS OLAS BLVD  
FT. LAUDERDALE, FL 33301 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CIRCE, BRETT J  
1102 SW 18 CRT  
FORT LAUDERDALE, FL 33315 ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DOERING, RALPH H III ☒ Change ☐ Addition  
721 NE 3RD AVE  
FORT LAUDERDALE, FL 33304

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DU  
KERR, Leigh  
808 E LAS OLAS BLVD  
FORT LAUDERDALE, FL 33301 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
TRACY MANDAR  
515 EAST LAS OLAS BLVD, Suite 1200  
FORT LAUDERDALE, FL 33301 ☐ 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 exemptions contained in Chapter 119, 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:**

*Tracy J Mandar*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TRACY J MANDAR

2/7/07 9547624452

Date

Daytime Phone #