2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21288

FILED Jan 30, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 6550 NORTH FEDERAL HWY SUITE 200 FORT LAUDERDALE, FL 33308 **New Mailing Address: Current Mailing Address:** 6550 NORTH FEDERAL HWY SUITE 200 FORT LAUDERDALE, FL 33308 FEI Number: 65-0002774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEWART, MICHAEL D 6550 NORTH FEDERAL HWY SUITE 200 FORT LAUDERDALE, FL 33308 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DOERING, RALPH H III Name: Name: 721 NE 3RD AVENUE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: Title: Title: () Delete () Change () Addition LEIGH, KERR Name: Name: Address: 808 E LAS OLAS BLVD #104 Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: Title: DT () Delete Title: () Change () Addition MEEHAN, JAMIE Name: Name: 901 E. LAS OLAS BLVD #101 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: Title: DΡ () Delete Title: () Change () Addition Name: MANDART, TRACY Name: 515 EAST LAS OLAS HWY SUITE 1200 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: Title: () Delete Title: () Change () Addition DOERING, JOHN C Name: Name: 2431 E LAS OLAS BLVD Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33301 City-St-Zip: Title: () Delete Title: (X) Change () Addition CIRCE, BRETT J QUAILEY, BRUCE Name: Name: Address: 1102 SW 18 CRT Address: 3070 NE 43RD STREET FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33315 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LEIGH R. KERR VP 01/30/2009