

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 22, 2004  
Secretary of State**

DOCUMENT# N26297

Entity Name: ALPHA CHI OMEGA HOUSE CORPORATION FOR GAMMA IOTA CHAPTER

**Current Principal Place of Business:**

820 PANELLENIC DRIVE  
GAINESVILLE, FL 326017888

**New Principal Place of Business:**

**Current Mailing Address:**

820 PANELLENIC DRIVE  
GAINESVILLE, FL 326017888

**New Mailing Address:**

FEI Number: 59-6142821      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARPENTER, RONALD A.  
4127 N.W. 27TH LANE  
GAINESVILLE, FL 32606

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

ALMOND, ELAINE C MRS.  
5512 SW 35TH WAY  
GAINESVILLE, FL 32608

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: ELAINE C. ALMOND      07/22/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: CARPENTER, DEANNA TA, YLOR  
Address: 2830 N.W. 5TH COURT  
City-St-Zip: GAINESVILLE, FL

Title: D ( ) Delete  
Name: MENA, CARRIE  
Address: 1505 FT CLARKE BLVD #4-303  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: MOORE, MARY  
Address: 4802 N.W. 18TH PLACE  
City-St-Zip: GAINESVILLE, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: DUNN, MIEKO  
Address: 4526 NW 34TH TERR  
City-St-Zip: GAINESVILLE, FL 32605

Title: D (X) Change ( ) Addition  
Name: ALMOND, ELAINE C  
Address: 5512 SW 35TH WAY  
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Change ( ) Addition  
Name: SHANNON, KAREN  
Address: 201 SE 2ND AVE #406  
City-St-Zip: GAINESVILLE, FL 32601

Title: D ( ) Change (X) Addition  
Name: WRIGHT, LEIGH  
Address: 2708 SE 48TH ST  
City-St-Zip: OCALA, FL 34480

Title: D ( ) Change (X) Addition  
Name: NGUYEN, DIANE  
Address: 3220 SE 24TH TER  
City-St-Zip: OCALA, FL 34471

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: ELAINE C. ALMOND      D      07/22/2004  
Electronic Signature of Signing Officer or Director      Date