

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N30250

1. Entity Name
UNIVERSITY OF CENTRAL FLORIDA ALPHA TAU
OMEGA HOUSING CORPORATION, INC.



Principal Place of Business
4419 GREEK CT.
ORLANDO, FL 32816 US

Mailing Address
P O BOX 3072
WINTER PARK, FL 32790 US

FILED

07 JUL -5 PM 12: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06292007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2956326

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MURRAH, KENNETH F
800 W MORSE BLVD, #1
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

Amended AR is \$61.25

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	D	<input type="checkbox"/> Delete
NAME	STARKS, GEORGE W	
STREET ADDRESS	4814 E. LAKE DR.	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MURRAH, KENNETH	
STREET ADDRESS	800 WEST MORSE BLVD.	
CITY-ST-ZIP	WINTER PARK, FL 32789	
TITLE	D	<input type="checkbox"/> Delete
NAME	O'DONOGHUE, W BRUCE	
STREET ADDRESS	707 NICOLE AVENUE, #100	
CITY-ST-ZIP	WINTER PARK, FL 32789	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STANAKIS, MARC C	
STREET ADDRESS	1718 LYNDALE BLVD	
CITY-ST-ZIP	MAITLAND, FL 32751	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	GREEN, THOMAS E	
STREET ADDRESS	100 COLONIAL CTR PKWY, #100	
CITY-ST-ZIP	LAKE MARY, FL 32746	
TITLE	PTD	<input type="checkbox"/> Delete
NAME	EDGAR, VERNON	
STREET ADDRESS	631 W. FAIRBANKS AVE., SUITE B	
CITY-ST-ZIP	WINTER PARK, FL 32789	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	100106259691
CITY-ST-ZIP	07/17/07--01020--012 **\$1.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Vernon G. Edgar Jr.*

Vernon G. Edgar Jr. 6/29/07

407-647-3266

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #