2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38040

FILED May 03, 2005 Secretary of State

Entity Name: EPSILON LAMBDA CHAPTER OF ALPHA DELTA PI HOUSE CORPORATION

Current Principal Place of Business: New Principal Place of Business:

4202 E. FOWLER AVE USF 30212 TAMPA, FL 33620 U

Current Mailing Address: New Mailing Address:

4202 E. FOWLER AVE USF 30212 TAMPA, FL 33620 US

FEI Number: 59-3023149 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: Name and Address of New Registered Agent:

PAWELKOP, JESSICA WAUGH, TAMMY
4208 S LYNWOOD AVE 17010 PALM POINT DRIVE
TAMPA, FL 33611 US TAMPA, FL 33647 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: TAMMY WAUGH 05/03/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT () Delete Title: DT (X) Change () Addition Name: REAGAN, JILL Name: WALTERS, BEVERLY Address: 4202 E. FOWLER AVE Address: 6635 GLENCOE DRIVE

 Address:
 4202 E. FOWLER AVE
 Address:
 6635 GLENCOE DRIVI

 City-St-Zip:
 TAMPA, FL 33620
 City-St-Zip:
 TAMPA, FL 33617

Title: DS () Delete Title: DS (X) Change () Addition Name: MERSSNER, MELINDA Name: TUNSTALL, NANCY

 Address:
 5125 PALM SPRINGS BLVD 6302
 Address:
 16206 SIERRA DE AVILA

 City-St-Zip:
 TAMPA, FL 33047
 City-St-Zip:
 TAMPA, FL 33613

Title: PPM () Delete Title: DP (X) Change () Addition Name: PAWLKOP, JESSICA Name: WAUGH, TAMMY

 Address:
 4208 S. LYNWOOD AVE
 Address:
 17010 PALM POINTE DRIVE

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 TAMPA, FL 33647

Title: DVP (X) Delete Title: () Change () Addition

 Name:
 MONTEITH, APRIL
 Name:

 Address:
 5125 PALM SPRINGS BLVD 6302
 Address:

 City-St-Zip:
 TAMPA, FL 33047
 City-St-Zip:

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: TAMMY WAUGH DP 05/03/2005