## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47625

FILED Sep 04, 2008 Secretary of State

Entity Name: ALPHA MU DELTA OF CHI PSI, INC.

**Current Principal Place of Business: New Principal Place of Business:** ROLLINS COLLEGE HOOKER HALL 1000 HOLT AVENUE WINTER PARK, FL 32789 US **New Mailing Address: Current Mailing Address:** C/O DEVANEY, JOSEPH J. 217 TRAPPER TRACE COURT JACKSONVILLE, FL 32259 FEI Number: 01-0654010 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: DEVANEY, JOSEPH J 217 TRAPPER TRACE COURT JACKSONVILLE, FL 32259 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 (X) Change ( ) Addition WELLS, KURT WELLS, KURT Name: Name: 2171 CHINOOK TRAIL Address: 2826 CALEDON LANE Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: CINCINNATI, OH 45244 Title: Title: ( ) Delete () Change () Addition DEVANEY, JOSEPH J. Name: Name: Address: 217 TRAPPER TRACE COURT Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition PINZON, FELIPE Name: PINZON, FELIPE Name: 2415 W. STROUD AVENUE 208 S HABANA AVE., UNIT I Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33609 Title: () Delete Title: () Change () Addition Name: GREEN, WILLIAM Name: Address: 7545 MILLS ROAD Address: City-St-Zip: OSTRANDER, OH 43061 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition EBERLE, NATHANIEL EBERLE, NATHANIEL Name: Name: 719 COMMERCIAL ST 76 AMSDEN ST Address: Address: City-St-Zip: WEYMOUTH, MA 02189 City-St-Zip: ARLINGTON, MA 02474 Title: () Delete Title: ( ) Change (X) Addition KAZANJIAN. JON Name: Name: Address: Address: 62 WAVERLY OAKS ROAD WALTHAM, MA 02452 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: JOSEPH J. DEVANEY D 09/04/2008