## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

**SIGNATURE** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

97 HAY 16 PM 3: 34

SECRETARY OF STATE TALLAHASSEE FLORIDA

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N48174

(9)

PI KAPPA ALPHA GAMMA OMEGA HOUSING AND ALUMNI AS SOCIATION, INC.

							[]]
Principal Pla	ace of Business Mai	ling Address		<del></del>			
2001 S. BAYS	SHORE DRIVE	S. BAYSHORE DRIVE		i			··· =·*· चावार ग्रह्म
SUITE 1600	SUIT	E-1600					
US FL 331	MINN	II FL 33133-5419	-				
00	US.				<ol> <li>Date Incorporated or Qualified 04/02/1992</li> </ol>	3a. Date of Las	t Report
2. Principal	Place of Business 2a.	Mailing-Address				09/04/	1996
21 10.	L Bricke Hill. 26	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Rniakell 1	Hve.	4. FEI Number - 65-0355421		Applied For
Suite, Apt		Suite, Apt. #, etc.	TAM	HVV	1 2 0000 00		Not Applicable
22	O\t\., \d\.\d\)\ 27	24	2. NID	λ	<ol><li>Certificate of Status Desired</li></ol>		5 Additional
City & Sta	1/VI\1\0\1.1\7 \	City & State		<b>U</b>	6. Election Campaign Financing		Required
23 Zip C	28	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MUHZ		Trust Fund Contribution	\$5.0	00 May Be ed to Fees
24		るからいか	Control 4	N	8. This corporation has liability for in		r 100 022
	9. Name and Address of Current Register	10000	30 M.O.	11	Horida Statutes	Yes Mo No	6. 159.032,
	or contract of current negliste	ted Allent	81 Nam		10. Name and Address of New Reg	Istered Agent	
GUTTER	REZ, NICOLAS J. JR		81 Nam	°CZ (A	HIPMOOD IM FOR	11.44A	1
	BAYSHORE DRIVE		82 Stree	t Address	APAC BOX NAMBORVIS NO ACCOMADA	11120107	<u> </u>
&UITE 1			83		DI Brickell HAR	·	
MAMI F	<b>7</b>		53		74P 2757		
			84 City		W SAIS	95 7i	deins be
11. Pursuant	to the provisions of Sections 617.0502 and 617. registered agept, or both, in the State of Florida. am familiar with applicacept the obligations of S	1508. Florida Statuto	s the shown name	<del>d</del>	- I VI I arni	FL 89 2	33131
office or i	registered agent, or both, in the State of Florida.	Such change was at	thorized by the co	o corpora rporation	ition submits this statement for the pui 's board of directors. I hereby accept	pose of changing	Its registered
SIGNATURE	WHANK X YOUTH MY		ipa siatutes.	منكفان	ME TO ELL M. A		1 h
	Signature, typed or printed name of reducted agent and title if the	Note:	Registered Agent eignatu			K/IX 41-	13/97
12,	OFFICERS AND DIRECTO	MS U	13.	o radolog a	ADDITIONS/CHANGES TO OFFICE	DATE DIDECTO	200 14 10
TITLE	SD STEEDER NICOLAGA I III	☐ DELETE	1.1 TITLE	Τ	10.10,0,0,0,10,000	Change	
NAME CTOSET ADDRESS	OUTIERREZ NIGOLAS J. JR.		1.2 NAME	CH	EMPEZJY, FAX, NEWS T	,	, LI AGGILLON
STREET ADDRESS	2601 S. BAYSHORE DRIVE, SUITE 160 MIAMI FL 33133	<b>D</b> -	1.3 STREET ADDRESS	CY)8/	Long Party Colds	t±x	
CITY-ST-7IP	D		1.4 CITY-ST-ZIP	ıı	Miami, FZ 53151	עכ	
NAME	KRALL, PETER A.	DELETE	2.1 TITLE		·	☐ Change	Addition
STREET ADDRESS	13300 SW 109TH PL.		2.2 NAME				
CITY-ST-ZIP	MIAMI FL 33176		2.3 STREET ADDRESS	1			]
TITLE	0	DELETE	2. 4 CITY - ST - ZIP	ļ			J
NAME	LARSON, RAYMOND M.	C OUTEIL	3.1 TITLE		QMMMma4	Change	Addition
STREET ADDRESS	30855 SW 205 AVENUE		3.2 NAME		9000021	7-0115c	nna U
CITY-ST-ZIP	MIAMI FL 33030		3.3 STREET ADDRESS		***3456	ექ	61.25
TITLE	DP	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	<del> </del>	77700		
NAME	MENDELSBERG, SCOTT W.	<del></del>	4. 2 NAME			Change	Addition
STREET ADDRESS	10861 SW 120TH STREET		4.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176		4.4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	5.1 TITLE		······································	N Phase	4.4.80
NAME	O'STEEN, SCOTT	i	5.2 NAME		end A same	Change	☐ Addition
STREET ADDRESS	0045 SW 107TH AVENUE, SUITE 219	-	5.3 STREET ADDRESS	701	Brickell Ave., 54c, 2250	<b>.</b>	1
CITY-ST-ZIP	MIAMI FL 33173		5.4 CITY-ST-ZIP	ľΥľ	Brickell Ave.,54c, 2150 Liami, FZ, 33131	•	
TITLE		DELETE	6.1 TITLE	I	marily to any	☐ Change	☐ Addition
NAME STORES ADDOCADO			6.2 NAME			L. Johnnyt	TH WOULDER
STREET ADDRESS			6.3 STREET ADDRESS				
14. I do hereby	Certify that the information supplied wat the		6.4 CITY - ST - ZIP				
information	certify that the information supplied with this fill indicated on this annual report or supplemental cer or director of the corporation or the receiver Block 12 or Block 12 if population	ing does not qualify for annual report is true	or the exemption st	ated in S	ection 119.07(3)(i), Florida Statutes. I	further certify that	the
appears in	icer or director of the corporation or the receiver Block 12 or Block 13 if changed, or on an a Paci	or trustee empowere	d to execute this re	eport as r	riginature shall have the same legal eff equired by Chapter 617, Florida Statu	ect as if made unites; and that my	der oath; that
	history	11000	Š				

## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997 DOCUMENT #
1. Corporation Name N48174

(9)

PI KAPPA ALPHA GAMMA OMEGA HOUSING AND ALUMNI AS

97 MAY 16 PM 3: 34

SECRETARY OF STATE TALLAHASSEE FLORIDA



SOCIATION, INC.										
	Principal Place	of Business M	lalling Address	· · · · · · · · · · · · · · · · · · ·		1 10012181 BII DIAOF 1818) 11011 10011 0	ANT MINIC DIGIT NICIT NICIT NICIT NI	BEŁ BLDII 1961		
	2001 S. BAYSHK	DRE DRIVE 20	OI-S. BAYSHORE DRIVE		İ					
_	SUITE 1600	SU	TITE 1880	_	Ì					
_	US TE 33139	MI	AMI FL 33133-3419	•	3. 1	Date Incorporated or Qualified	3a. Date of Last R	eport	)	
	03					Date Incorporated or Qualified 04/02/1992	09/04/199	96		
	h	- V2 117 11 JUNIO - Francis	Mailing Address R	nistoll A	Ve. 4.1	El Number 65-0355421	<del></del>	plied For		
	Suite, Apt	DYCKY HVV 26	Suite, Apt. #, etc.	10/201-11	MY.		\$0.7E	t Applicable		
	22	246, 2720 [2]	246	. Alba	5. (	Certificate of Status Desired	Fee Re			
	City & State	I/ V   1 A   V  1   1 V   V   V	City & State Minn	AI C		lection Campaign Financing	\$5.00			
	Zip とうか	A Country 28	Zip	Country   CA Y		Frust Fund Contribution	Added 1			
	24 33	137 52 172H 53	3972T 2	¬		This corporation has liability for i ⊋torida Statutes	ntarigipje tax under в. Yes Mo	199.032,	١.	
		9, Name and Address of Current Region	tered Agent		. 10.	Name and Address of New Re	glatered Agent			
	}			81 Name	المراكم	DIAMOT TM FOR	. Nichiail.		ĺ	
	GUTHERR	EZ, NIGOLAS J. JR.		82 Street	Address P	O. Bex Number is Not Action as	Pittianno A			
	2 <del>001-S</del> I	BAYSHORE DRIVE			700	Brickey Hak	<u> </u>		1	
	SUITE 18	-		83	• •	THE DIEN			(	
	MIAMI FL	-33133		84 City			85 ZigH	SÃON A	ĺ	
				-		MIAMI	- FL   7º	(2)(2)	1	
	11. Pursuant to	o the provisions of Sections 617.0502 and to egistered agent, or both, in the State of Flor m/arriviar with)apolaccept the obligations of	317.1508, Florida Statutes ida. Such change was aut	, the above-named thorized by the corp	corporation poration's bo	submits this statement for the poard of directors. I hereby accer	urpose of changing it of the appointment as	s registered   Jegistered	1	
	agent Lar	n /ambiat with) and lackapt the obligations of	Section 617.0503, Florii	da Statutes.	ممسكفا	- the Circles 1	1.3 111	DIAL I	l	
	SIGNATURE _	Signature, typed or printed name of repatiened liquent and title	TAN JAN TAICO	NO U COM	AMIN	, Mr. Kear	19417 41 -	2/4.7	l	
	12.	OFFICERS AND DIRE		legistered Agent eignature 13.		DDITIONS/CHANGES TO OFFICE	CERS AND DIRECTOR	S IN 12	6	
	TITLE	SD	DELETE	1.1 TITLE	<u></u>		Change	Addition	90/6	
	NAME	OUTIERREZ, NICOLAS J. JR.		1.2 NAME	CHIE	NOZUM, ENA, Nimbre	at T		! . <sup>-</sup>	
	STREET ADDRESS	2801 S. BAYSHORE DRIVE, SUITE	1600-	1.3 STREET ADDRESS	TOLE	inded Ave. Ste. h	λέn		R2F037	
	CITY-ST-7IP	MIAMI FL 33133		1.4 CITY-ST-ZIP	M	iami, FL 53131	400		S	
	TITLE	D	DELETE	2.1 TITLE			☐ Change	Addition	C	
	NAME	KRALL, PETER A.		2.2 NAME						
	STREET ADDRESS	13300 SW 109TH PL.		2.3 STREET ADDRESS	1				l	
	CITY-ST-ZIP	MIAMI FL 33176	T 27.53	2. 4 CITY - ST - ZIP					l	
	TOTLE	D DAYMOND H	☐ DELETE	3.1 TITLE	i	9000021		Addition	1	
	NAME	LARSON, RAYMOND M. 30855 SW 205 AVENUE		3.2 NAME	}	9000021 -05/22/	9701136	003 <sup>~</sup>		
	STREET ADDRESS	MIAMI FL 33030		3.3 STREET ADDRESS		***345	6.25 ****		ł	
	CITY-ST-ZIP	DP	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	<del> </del>		☐ Change	Addition	ł	
	NAME	MENDELSBERG, SCOTT W.	E DECEN	4. 2 NAME			Change	L_J ADDRION	ł	
	STREET ADDRESS	10861 SW 120TH STREET		4.3 STREET ADDRESS						
	CITY-ST-ZIP	MIAMI FL 33176		4.4 CITY-ST-ZIP					•	
	TIFLE	D	DELETE	5.1 TITLE		·	Change	Addition		
	NAMÉ .	O'STEEN, SCOTT		5.2 NAME	l	Coll Air will have			Į	
	STREET ADDRESS	0045 9W 107TH AVENUE, SUITE 2	<del>19</del>	5.3 STREET ADORESS	1701 B	vickell Are 246 97	50			
	City-St-ZiP	MIAMI FL 33173		5.4 CITY-ST-ZIP	γη;	nidell Ave., 54, 22 iami, FZ 93131			ļ	
	TITLE		DELETE	6.1 TITLE			Change	Addition	ĺ	
	NAME			6.2 NAME	]				Ì	
	STHEET ADDRESS			6.3 STREET ADDRESS	ļ					
	CITY - ST - ZIP			6.4 CITY-ST-ZIP						
		and the state of t			1 1 1 2	21. 440 03/01/21 Ft 14. 5	1 2 4			

I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 of Block 13 inchanged, or on an appears with an address.

**SIGNATURE**