

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48174

FILED
Apr 29, 2005
Secretary of State

Entity Name: PI KAPPA ALPHA GAMMA OMEGA HOUSING AND ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

1528 PALERMO AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

2665 S BAYSHORE DR
SUITE 701
MIAMI, FL 33133

Current Mailing Address:

1528 PALERMO AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

2665 S BAYSHORE DR
SUITE 701
MIAMI, FL 33133

FEI Number: 65-0355421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTIERREZ, JR., NICOLAS J ESQ.
1528 PALERMO AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GUTIERREZ, JR., NICOLAS J ESQ.
2665 S BAYSHORE DR
SUITE 701
MIAMI, FL 33133 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:

04/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: GUTIERREZ, JR., NICOLAS J ESQ.
Address: 1528 PALERMO AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: LARSON, RAYMOND M
Address: 30855 SW 205 AVENUE
City-St-Zip: MIAMI, FL 33030

Title: DP () Delete
Name: MENDELSBERT, SCOTT W
Address: 10861 SW 120TH STREET
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: O'STEEN, SCOTT
Address: 13925 N.W. 60TH AVENUE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: GUTIERREZ, JR., NICOLAS J ESQ.
Address: 2665 S BAYSHORE DRIVE, SUITE 701
City-St-Zip: MIAMI, FL 33133

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: NICOLAS J. GUTIERREZ, JR., ESQ.

SD

04/29/2005

Electronic Signature of Signing Officer or Director

Date