

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001683

FILED
Feb 25, 2004
Secretary of State**Entity Name:** CHI PHI FRATERNITY-DELTA ZETA ALUMNI ASSOCIATION, INC.**Current Principal Place of Business:**15806 WHEATFIELD PL
TAMPA, FL 33624 US**New Principal Place of Business:****Current Mailing Address:**MICHAEL S GRAFSTROM
15806 WHEATFIELD PLACE
TAMPA, FL 33624 US**New Mailing Address:****FEI Number:** 59-3187203**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GRAFSTROM, MICHAEL S
15806 WHEATFIELD PL
TAMPA, FL 33624 US**Name and Address of New Registered Agent:**

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:

Title: S () Delete
Name: HOPKINS, TRAVIS
Address: 100 4TH AVENUE SOUTH 223
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: P () Delete
Name: FEDERMAN, PAUL
Address: 6016 B LAKETREE LANE
City-St-Zip: TAMPA, FL 33617

Title: VP () Delete
Name: ROSS, ALEX
Address: 804 STRAW LAKE DRIVE
City-St-Zip: BRANDON, FL 33510

Title: D () Delete
Name: GRAFSTROM, MICHAEL S
Address: 15806 WHEATFIELD PLACE
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: WOODWARD, RUSSELL W
Address: 5719 PINEY LANE DR
City-St-Zip: TAMPA, FL 33625 US

Title: D () Delete
Name: CERRA, SHAWN
Address: 1981 OAKMONT TERRACE
City-St-Zip: POMPANO BEACH, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: T (X) Change () Addition
Name: CERRA, SHAWN
Address: 1981 OAKMONT TERRACE
City-St-Zip: POMPANO BEACH, FL 33071

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: MICHAEL S. GRAFSTROM

D

02/25/2004

Electronic Signature of Signing Officer or Director

Date