## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Aug 16, 2006 8:00 am Secretary of State DOCUMENT # N97000000933 08-16-2006 90003 038 \*\*\*\*61.25 ALPHA IOTA CHAPTER, INC. Principal Place of Business Mailing Address POST OFFICE BOX 5065 GAINESVILLE FL 32602-5065 POST OFFICE BOX 5065 GAINESVILLE FL 32602-5065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E037 (4/06) 4. FEI Number Applied For City & State City & State **NO-T APPLICABLE** Not Applicable \$8.75 Additional Zin Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DORIS CHRISTIAN, JACKIE 1806 SE HWY 301 HAWTHORNE FL 32640 Zip Code **3 み ら ぐ ぐ** 8. 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. Larn familiar with, and accept the obligations of registered agent. Duris 7-18-06 (NOTE: Registered Agent signature reduced when remistating) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Due By September 6, 2006 П Florida Department of State Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TILLE Delete IIILE President Addition CHRISTIAN, JACQUELYN J Graham, Sandra 2510 NE 3Rd Place NAME NAME PO BOX 1976 STREET ADDRESS STREET ADDRESS HAWTHORNE FL 32640 CITY-ST-ZIP CITY+ST-ZIP 1VPD Delete ☐ Change **Addition** TITLE TITLE RAVEN, DORIS Chandler, Armarene 2312 NW 59th Terrace NAME NAME **3721 NW 21ST PLACE** STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32605 CITY-ST-ZIP Gainesville, FL 32606 \$/D-- --Secretary Addition HILE Delete 111LE Monsanto, lancing. Monsanto, lancing. SE 6th Ave. Tanaly n THOMAS, SHARON NAME NAME **3814 NW 31ST PLACE** STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32606 CITY-ST-ZIP CITY-ST-ZIP Gainewille, FL 32641 Addition Delete ☐ Change TITLE TITLE Treasurer WILLIAMS, AUDREY NAME NAME Raven, Doris Place STREET ADDRESS 2234 NW 44TH PLACE STREET ADDRESS GAINESVILLE FL 32605 CITY - ST - 716 CITY-ST-7IP Gaines ville, FL 32641 TITLE ☐ Delete TITLE ☐ Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIE CITY-ST-ZIE TITLE ☐ Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS CUY-ST-ZIP CITY-ST-7IP

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DOR:3 Rosen 7-18-06 (353) 373-70-98