


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2005 08:00 AM
Secretary of State

DOCUMENT # N98000005934	
1. Entity Name GAMMA ETA MANSION CORPORATION	

Principal Place of Business 4834 BALLYGAR DR. TALLAHASSEE, FL 32309	Mailing Address 4834 BALLYGAR DR. TALLAHASSEE, FL 32309
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01312005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3569843	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUFF, P. MICHAEL
 2246 MONAGHAN DR.
 TALLAHASSEE, FL 32308

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

02/09/05-80007-018 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MURRAY, EDWARD 1018 THOMASVILLE RD TALLAHASSEE, FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD YEARTY, JOHN A PO BOX 38448 TALLAHASSEE, FL 32315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RUFF, P. MICHAEL 2246 MONAGHAN DR. TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CLEMENTS, MERRIT R JR 625 N. ADAMS ST. TALLAHASSEE, FL 32302
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMPBELL, CLAYTON 2831 YARMOUTH CT. TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERVIN, WILLIAM 2831 YARMOUTH CT. TALLAHASSEE, FL 32308

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: John A. Yearly 1-31-05 850-668-9518