## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000001473

FILED Apr 30, 2011 Secretary of State

Entity Name: PSI MU HOUSE CORPORATION OF CHI OMEGA FRATERNITY

Current Principal Place of Business: New Principal Place of Business:

105 JAY COURT

ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

2857 CLIFFE COURT 363 CROTON DRIVE OVIEDO, FL 32765 MAITLAND, FL 32751

FEI Number: 59-3597205 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOENIG, KRISTY M PD 105 JAY COURT

ALTAMONTE SPRINGS, FL 32714 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

Name: KELLY, NICOLE D Address: 15473 PERDIDO DR City-St-Zip: ORLANDO, FL 32828

Title: D

 Name:
 JANE, MAGUIRE D

 Address:
 1420 POINSETTIA AVENUE

 City-St-Zip:
 ORLANDO, FL 32804

Title: TD

Name: CROSS, CARRIE TD

Address: 5039 SHOREWOOD LANDING, LN

City-St-Zip: OVIEDO, FL 327465

Title:

Name: BORNFREUND, LAURA A D Address: 8011 COLESVILLE RD, APT. 211 City-St-Zip: SILVER SPRING, MD 20910

Title: SD

Name: JACKSON, KRISTEN D Address: 363 CROTON DRIVE City-St-Zip: MAITLAND, FL 32751

Title: PD

Name: KOENIG, KRISTY PD Address: 105 JAY COURT

City-St-Zip: ALTAMONT SPRINGS, FL 32714

I hereby 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 all other like empowered.

SIGNATURE: KRISTY M KOENIG PD 04/30/2011