2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: SIGMA PI PHI FRATERNITY SCHOLARSHIP AND DEVELOPMENT FOUNDATION OF JACKSONVILLE, INC.

Current Principal Place of Business:

1732 MARGARET STREET
JACKSONVILLE, AL 32204

Current Mailing Address:

12267 HAWKSTOWE LANE
JACKSONVILLE, FL 32225

FEI Number: 45-5547005

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERGUSON, CLEVELAND III
12267 HAWKSTOWE LANE
JACKSONVILLE, FL 32225 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

Officer/Director Detail :

Title	D/P
Name	CODY, BETTY A
Address	10240 HEATHER GLEN DRIVE
City-State-Zip:	JACKSONVILLE FL 32256

Title	D/VP
Name	FERGUSON, CLEVELAND III
Address	12267 HAWKSTOWE LANE
City-State-Zip:	JACKSONVILLE FL 32225

Title	D/T
Name	QUARLES, LUTHER DIII
Address	6359 WHISPERING OAKS DRIVE N.
City-State-Zip:	JACKSONVILLE FL 32277

Title	D/S
Name	JONES, CARLTON D
Address	1732 MARAGARET STREET
City-State-Zip:	JACKSONVILLE FL 32204

Title	D
Name	QUARLES, PAMELA
Address	6359 WHISPERING OAKS DRIVE N.
City-State-Zip:	JACKSONVILLE FL 32277

Title	D
Name	MITCHELL, ORRIN DDDS
Address	5365 OAK BAY DRIVE E.
City-State-Zip:	JACKSONVILLE FL 32277

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: CLEVELAND FERGUSON III DIRECTOR 04/29/2016

Electronic Signature of Signing Officer/Director Detail — Date