2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2023
Secretary of State
0954645830CC

DOCUMENT# N12000006163

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

Current Principal Place of Business:

13846 ATLANTIC BLVD UNIT 213
JACKSONVILLE, FL 32225

Current Mailing Address:

13846 ATLANTIC BLVD UNIT 213
JACKSONVILLE, FL 32225 US

FEI Number: 45-5547005

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GRIFFIN, MARK L
12511 MISSION HILLS DR S
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: MARK L GRIFFIN 02/08/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

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

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

Title	DIRECTOR
Name	BROWN, LEONARD D ESQ.
Address	1272 PONTE VEDRA BLVD
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	DIRECTOR/TREASURER
Name	GRIFFIN, MARK L DR.
Address	12511 MISSION HILLS DR S
City-State-Zip:	JACKSONVILLE FL 32225

Title	DIRECTOR
Name	JONES, CARLTON D
Address	95580 BURNEY RD PO BOX 16777
City-State-Zip:	FERNANDINA BEACH FL 32034

Title	DIRECTOR/SECRETARY
Name	CROOM, WILLIAM B.
Address	248 RINCON DRIVE
City-State-Zip:	SAINT AUGUSTINE FL 32095

Title	DIRECTOR/PRESIDENT
Name	HARLEY, LANGSTON C
Address	13846 ATLANTIC BLVD UNIT 213
City-State-Zip:	JACKSONVILLE FL 32225

Title	DIRECTOR
Name	BARROW, JOSEPH L
Address	2705 GRAND AVENUE
City-State-Zip:	JACKSONVILLE FL 32210

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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: MARK L GRIFFIN DIRECTOR 02/08/2023

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	HERRING, NATHANIEL R JR.
Address	24419 MOSS CREEK LANE
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	DIRECTOR
Name	SMITH, DARNELL
Address	11768 CHERRY BARK DR E
City-State-Zip:	JACKSONVILLE FL 32218

Title	DIRECTOR
Name	MACK, BRANDON L
Address	11664 HICKORY OAK DRIVE
City-State-Zip:	JACKSONVILLE FL 32218

Title	DIRECTOR
Name	SMITH, DERRICK W
Address	188 LAMP LIGHTER LANE
City-State-Zip:	PONTE VEDRA BEACH FL 32082