

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000006737

Entity Name: TAU ALPHA CHAPTER OF TAU EPSILON PHI FRATERNITY
ALUMNI ASSOCIATION, INC.**FILED**
Apr 06, 2021
Secretary of State
0243240191CC**Current Principal Place of Business:**3201 GRIFFIN ROAD
203
DANIA BEACH, FL 33312**Current Mailing Address:**3201 GRIFFIN ROAD
203
DANIA BEACH, FL 33312 US**FEI Number: 84-3100079****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**FEINMAN, STEVEN A ESQ.
3201 GRIFFIN ROAD
203
DANIA BEACH, FL 33312 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** DIRECTOR
Name ROTH, MICHAEL
Address 910 QUAYE LAKE CIRCLE
107
City-State-Zip: WELLINGTON FL 33411**Title** DIRECTOR
Name FEINMAN, STEVEN A ESQ.
Address 3201 GRIFFIN ROAD
203
City-State-Zip: DANIA BEACH FL 33312**Title** DIRECTOR
Name LEVY-HARA, IVAN
Address 3141 NE 211TH STREET
City-State-Zip: AVENTURA FL 33180**Title** DIRECTOR
Name WAXMAN, SAM
Address 5400 SOUTH UNIVERSITY DRIVE
104
City-State-Zip: DAVIE FL 33328**Title** DIRECTOR
Name ZIFRONY, MATTHEW Z
Address 110 SE 6TH STREET
SUITE 1500
City-State-Zip: FORTLAUDERDALE FL 33301**Title** DIRECTOR
Name LEADER, MICHAEL D
Address 633 SOUTH ANDREWS AVE
SUITE 201
City-State-Zip: FORT LAUDERDALE, FL 33301**Title** DIRECTOR
Name SCHULTZ, STEVE
Address 15951 SW 41ST STREET
SUITE 800
City-State-Zip: DAVIE FL 33331**Title** DIRECTOR
Name SCHOONOVER, SOLOMON
Address 121 NE 3RD STREET
City-State-Zip: FORT LAUDERDALE FL 33301**Continues on page 2**

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: STEVEN A FEINMAN**DIRECTOR****04/06/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SWILL, JONATHAN
Address	99 E MIZNER BLVD
City-State-Zip:	BOCA RATON FL 33432