

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005838

Entity Name: SIGMA KAPPA NATIONAL HOUSING CORPORAITON**Current Principal Place of Business:**695 PRO MED LANE
SUITE 300
CARMEL, IN 46032**Current Mailing Address:**695 PRO MED LANE
SUITE 300
CARMEL, IN 46032 US**FEI Number:** 35-1913455**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COOPER, JANE
9230 EVERWOOD STREET
ORLANDO, FL 32825 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	PRESIDENT
Name	WILLIS, SUSAN
Address	1060 WHITESTONE RIDGE
City-State-Zip:	ALPHARETTA GA 30005

Title	TREASURER
Name	NAPPER, JULIE
Address	18305 STANDWICK DR
City-State-Zip:	LOUISVILLE KY 40245

Title	VP
Name	EVANS, ROXANNE
Address	PO BOX 381253
City-State-Zip:	GERMANTOWN TN 38183

Title	EXECUTIVE DIRECTOR
Name	KELLER, CASEY
Address	695 PRO MED LANE SUITE 300
City-State-Zip:	CARMEL IN 46032

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: CASEY KELLER**EXECUTIVE DIRECTOR****01/04/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date