



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3000

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 125309		2. Name of Corporation LAMBDA CHI ALPHA PROPERTIES INC			
3. State of Incorporation INDIANA		4. Corporate address in Rhode Island - Street Address Scott Tsagarakis 34 Lower College Road		City Kingston	Zip 02881
5. Foreign corporation. Enter principal office address 8741 Founders Road		City Indianapolis	State IN	Zip 46268	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island own and operate fraternity housing on college campus					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mike Smith			Vice President Name Mark Perks		
Street Address 600 Harrison St			Street Address 3274 Kenyon Rd		
City Denver	State CO	Zip 80206	City Upper Arlington	State OH	Zip 43221
Secretary Name William T Farkas			Treasurer Name Thomas Larson		
Street Address 8741 Founders Road			Street Address 3547 Las Palmas Ave		
City Indianapolis	State IN	Zip 46268	City Glendale	State CA	Zip 91208
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) - R.I.G.L. 7-6-23					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name Scott C Tsagarakis			Address		
Address 34 Lower College Road			City Kingston	Zip 02881	

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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FILED

10:00

APR 06 2010

By [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer
William T Farkas

Date
3/18/10

Print or Type Name of Officer
William T Farkas

Assistant Secretary

Title of Officer

File Date	2010 APR -6 AM 10:00
Check No.	
By	
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