No. C 11305		Due no later than Oct 31, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		NAMES OF TAXABLE PARTY OF TAXABLE PARTY.	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. BETA THETA FACILITY CORPORATION OF KAPPA ALPHA THETA FRATERNITY, INC. BONNIE M BROWN 8740 FOUNDERS RD INDIANAPOLIS IN 46268						
					BOISE ID 63703			
				3. <u>New</u> Registere	3. New Registered Agent Signature:*			
4. Corporations: Enter Na	ames and Busin	ess Addresses of	President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	ELIZABETH CORRIDAN		8740 FOUNDERS RD	INDIANAPOLIS	IN	USA	46268	
TREASURER	ANGELA GRIMES		8740 FOUNDERS RD	INDIANAPOLIS	IN	USA	46268	
DIRECTOR KATHY SCHW			8740 FOUNDERS RD	INDIANAPOLIS	IN	USA	46268	
PRESIDENT MARY JANE BE			8740 FOUNDERS RD	INDIANAPOLIS	IN	USA	46268	
DIRECTOR	KELLIE DICK	ERSON	8740 FOUNDERS RD	INDIANAPOLIS	IN	USA	46268	
5. Organized Under the Laws of: 6. Annual Re		6. Annual Repor	t must be signed.*					
ID C 11305		Signature: Eli		Date: 10/13/2017				
		Name (type o		Title: Secretary				
Processed 10/13/2017 * Electronically provided signatures are accepted as original signatures.								