

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 10 PM 2:05

DOCUMENT # N93000005265 (4)
1. Corporation Name

KAPPA ALPHA PSI FOUNDATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business 2185 NW 19TH ST FT LAUDERDALE FL 33311	Mailing Address 2185 NW 19TH ST FT LAUDERDALE FL 33311
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3. Date Incorporated or Qualified 11/22/1993	3a. Date of Last Report 04/26/1994
4. FEI Number 65-0474 137	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country 30
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9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-stating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	BRAYNON, JR. R
STREET ADDRESS	1830 NW 25TH AVE
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	D
NAME	DALLAS, JAMES
STREET ADDRESS	3870 NW 6TH CT
CITY-ST-ZIP	FT LAUDERDALE FL 33311
TITLE	D
NAME	GIBBS, JAMES
STREET ADDRESS	2740 SOMERSETT DR #U412
CITY-ST-ZIP	LAUDERDALE LAKES FL 33311
TITLE	D
NAME	HUMPHRIES, THORNTON
STREET ADDRESS	2071 NW 30TH TERRACE
CITY-ST-ZIP	FT LAUDERDALE FL 33311
TITLE	T
NAME	MERRITT, GORDON
STREET ADDRESS	2781 NW 26TH AVE
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	D
NAME	SCRUGGS, FRANK
STREET ADDRESS	4410 NW 12TH CT
CITY-ST-ZIP	LAUDERHILL FL 33313

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	BRAYNON, JR. R.
1.3 STREET ADDRESS	5208 N.W. 67th AVE.
1.4 CITY-ST-ZIP	LAUDERHILL, FLA. 33319
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Donald W. Braynon, Jr. January 25, 1995
(Signature and typed or printed name of signing officer or director)
 DONALD W. BRAYNON, JR.