## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000000087

FILED Feb 19, 2008 Secretary of State

Entity Name: JACKSONVILLE ALUMNI CHAPTER OF KAPPA ALPHA PSI GUIDE RIGHT SCHLORSHIP &

DEVELOPMENT FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3717 WEST MONCRIEF RD WEST JACKSONVILLE, FL 32209

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 40625 JACKSONVILLE, FL 32203

FEI Number: 59-3503848 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GAMBLE, DENNIS 4564 RIVER TRAIL ROAD JACKSONVILLE, FL 32277 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition JONES, DR. CARLTON Name: Name: 429 ROYAL TERN RD., S Address: Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip:

Title: () Delete Title: () Change () Addition

GAMBLE, DENNIS Name: Name: Address: 4564 RIVER TRAIL ROAD Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip:

Title: DV () Delete Title: () Change () Addition

MILLER, HERMAN JR Name: Name: 7636 CATHEDRAL OAKS PL SOUTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip:

Title: DS ( ) Delete Title: DVT (X) Change ( ) Addition FERGUSON, CLEVELAND Name: Name: CUNNINGHAM, THOMAS L 12267 HAWKSTOWE LANE 144 PINEHURST POINT DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: ST. AUGUSTINE, FL 32092

Title: DVT () Delete Title: DS (X) Change ( ) Addition CUNNINGHAM, THOMAS FERGUSON, CLEVELAND Name: Name:

3717 MONCRIEF ROAD WEST 12267 HAWKSTOWE LANE Address: Address: City-St-Zip: JACKSONVILLE, FL 32209 City-St-Zip: JACKSONVILLE, FL 32225

Title: () Delete Title: () Change () Addition

MCCAULEY, RONALD Name: Name: Address: 3264 RACQUET CT Address: JACKSONVILLE, FL 32277 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CLEVELAND FERGUSON DS 02/19/2008