

2000 UNIFORM BUSINESS REPORT (UBR)

9/5/00-90042-039-\$61.25-\$61.25

DOCUMENT # N99000003311

1. Entity Name

THE ORLANDO ALUNI CHAPTER OF KAPPA ALPHA PSI FRA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP 27 AM 7:50

Principal Place of Business

Mailing Address

960 WINDGROVE TR.
MAITLAND FL 32751

P.O. BOX 555088
ORLANDO FL 32588-5088

2. Principal Place of Business

3. Mailing Address

1461 Shadwell Circle

P.O. Box 555088

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Heathrow, Florida

Orlando, Florida

4. FEI Number

Applied For

59-3611545

Not Applicable

Zip

Country

Zip

Country

32746

U.S.

32588-5088

U.S.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIS, OSCAR W JR.
960 WINDGROVE TR.
MAITLAND FL 32751

Name James, Smith

Street Address (P.O. Box Number is Not Acceptable)

1461 Shadwell Circle

City Heathrow, Florida

FL

Zip Code 32746

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WILLIS, OSCAR W JR	
STREET ADDRESS	960 WINDGROVE TR.	
CITY-ST-ZIP	MAITLAND FL 32751	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HODGES, MARRACO A	
STREET ADDRESS	7376 HIGH LAKE DR.	
CITY-ST-ZIP	ORLANDO FL 32811	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STEPHENS, NATHANIEL JR	
STREET ADDRESS	1014 BYERLY WAY	
CITY-ST-ZIP	ORLANDO FL 32818	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SIMMONS, PRINGLE	
STREET ADDRESS	4661 ALHAMA ST.	
CITY-ST-ZIP	ORLANDO FL 32801	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	POITIER, MAURICE	
STREET ADDRESS	2829 MONTE CARLO TR.	
CITY-ST-ZIP	ORLANDO FL 32805	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BOYD, ERNEST H	
STREET ADDRESS	2242 PIPESTONE CT.	
CITY-ST-ZIP	ORLANDO FL 32818	

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Smith, James	
STREET ADDRESS	1461 Shadwell Circle	
CITY-ST-ZIP	Heathrow, Florida 32746	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Odom, Ralph	
STREET ADDRESS	3307 Lake Tiny Circle	
CITY-ST-ZIP	Orlando, FL 32818	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Delm Brown, Delmas	
STREET ADDRESS	1689 Glenhaven Circle	
CITY-ST-ZIP	Ocoee, FL 34761	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Nash, Johnny	
STREET ADDRESS	4516 Lake Martin Lane Apt. F	
CITY-ST-ZIP	Orlando, Florida 32808	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/23/00 (407)292-1811

Date Daytime Phone #

CR2E037 (5/00)