

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 09, 2009
Secretary of State**

DOCUMENT# N99000003311

Entity Name: THE ORLANDO ALUNI CHAPTER OF KAPPA ALPHA PSI FRATERNITY, INC.

Current Principal Place of Business:

850 CHARLOTTE STREET
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 555088
ORLANDO, FL 325885088

New Mailing Address:

FEI Number: 59-3611545 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NELSON, ALBERT
850 CHARLOTTE STREET
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: STEPHENS, NATHANIEL JR
Address: 7815 WESTMINISTER ABBEY BLVD
City-St-Zip: ORLANDO, FL 328355955

Title: P () Delete
Name: BELL, LONNIE
Address: 4527 S LAKE ORLANDO PKWY.
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: BLACKSHEAR, EDWARD L
Address: P.O. BOX 664
City-St-Zip: SANFORD, FL 32772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: NATHANIEL STEPHENS, JR.

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04/09/2009

Electronic Signature of Signing Officer or Director

_____ Date