

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 19, 2012
Secretary of State**

DOCUMENT# N99000003311

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

Current Principal Place of Business:

8613 BEAR HAVEN CT
SANFORD, FL 327718122 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 555088
ORLANDO, FL 328555088 US

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:

BLACKSHEARE, EDWARD L
8613 BEAR HAVEN CT
SANFORD, FL 327718122 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
Name: STEPHENS, NATHANIEL JR
Address: 7815 WESTMINISTER ABBEY BLVD
City-St-Zip: ORLANDO, FL 328355955

Title: P
Name: LANG, CALVIN
Address: 7017 SLATE STREET
City-St-Zip: ORLANDO, FL 32810 US

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

I hereby 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 all other like empowered.

SIGNATURE: NATHANIEL STEPHENS

T

04/19/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date