

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007117

Entity Name: KAPPA PSI ORLANDO CHAPTER, INC.**Current Principal Place of Business:**6550 SANGER ROAD
420
ORLANDO, FL 32827**Current Mailing Address:**6550 SANGER ROAD
420
ORLANDO, FL 32827 US**FEI Number:** 27-2820279**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ALI, SHEFA
920 HUNTERS CREEK DR.
APT 2104
DELAND, FL 32720 US*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:** SHEFA ALI

04/05/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ALI, SHEFA
Address	920 HUNTERS CREEK DR. APT 2104
City-State-Zip:	DELAND FL 32720

Title	VP, TREASURER
Name	KOVACS, ALEXIS
Address	7225 CROSSROADS GARDEN DR. APT #4425
City-State-Zip:	ORLANDO FL 32821

Title	DIRECTOR
Name	DO, TIMMY
Address	5117 FENWOOD LN
City-State-Zip:	ORLANDO FL 32814

Title	DIRECTOR
Name	NGUYEN, JACQUELINE
Address	8106 WHISTLE WIND COURT
City-State-Zip:	ORLANDO FL 32817

Title	DIRECTOR
Name	BACCHUS, RAVI
Address	453 10TH PLACE
City-State-Zip:	VERO BEACH FL 32960

Title	SECRETARY
Name	FIGUEROA, SHELBY
Address	14025 BENVOLIO CIRCLE UNIT 208
City-State-Zip:	ORLANDO FL 32824

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: SHEFA ALI

PRESIDENT

04/05/2022

Electronic Signature of Signing Officer/Director Detail

Date