2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2017
Secretary of State
CC6821292060

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Entity Name: JACKSONVILLE ALUMNI CHAPTER OF KAPPA ALPHA PSI GUIDE RIGHT SCHLORSHIP & DEVELOPMENT FOUNDATION, INC.

Current Principal Place of Business:

3717 WEST MONCRIEF RD WEST
JACKSONVILLE, FL 32209

Current Mailing Address:

POST OFFICE BOX 40625
JACKSONVILLE, FL 32203

FEI Number: 59-3503848

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUSTER, REGINALD
3017 SOUTHERN HILLS CIRCLE WEST
JACKSONVILLE, FL 32225 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: REGINALD LUSTER 05/07/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

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

Title	DIRECTOR
Name	FERGUSON, CLEVELAND
Address	12267 HAWKSTOWE LANE
City-State-Zip:	JACKSONVILLE FL 32225

Title	EXECUTIVE DIRECTOR
Name	BURRELL, JOHN F
Address	12311 KENSINGTON LAKES DRIVE UNIT # 2706
City-State-Zip:	JACKSONVILLE, FL 32224

Title	DIRECTOR
Name	MALPRESS, CHARLES H JR.
Address	4828 FOXBORO ROAD
City-State-Zip:	JACKSONVILLE FL 32208

Title	VC
Name	CODY, WILLIAM L
Address	10240 HEATHER GLEN DRIVE
City-State-Zip:	JACKSONVILLE FL 32256

Title	DIRECTOR, TREASURER
Name	MCCAULEY, RONALD
Address	3264 RACQUET CT
City-State-Zip:	JACKSONVILLE FL 32277

Title	EXECUTIVE SECRETARY
Name	LUSTER, REGINALD
Address	3017 SOUTHERN HILLS CIRCLE WEST
City-State-Zip:	JACKSONVILLE FL 32225

Title	DIRECTOR
Name	CODY, BETTY
Address	10240 HEATHER GLEN DRIVE
City-State-Zip:	JACKSONVILLE, FL 32256

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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: RONALD A. MCCAULEY VP OF FINANCE 05/07/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	NORWOOD, MEL C II
Address	400 EAST BAY STREET SUITE 2002
City-State-Zip:	JACKSONVILLE FL 32202

Title	DIRECTOR
Name	LUNDY, MARIO
Address	3589 HARTSFIELD FOREST CIRCLE
City-State-Zip:	JACKSONVILLE FL 32277