2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713039

FILED May 06, 2008 Secretary of State

Entity Name: THE TALLAHASSEE ALUMNI CHAPTER OF KAPPA ALPHA PSI FRATERNITY INC.

Current Principal Place of Business: New Principal Place of Business:

2047 SUMMER LANE

TALLAHASSEE, FL 32310 US

Current Mailing Address: New Mailing Address:

P.O. BOX 6895

TALLAHASSEE, FL 32314

FEI Number: 23-7279549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAYNES, CHAUNCY E 2047 SUMMER LANE

TALLAHASSEE, FL 32314 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:

\L. _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: P (X) Change () Addition

 Name:
 HAYNES, CHAUNCY E
 Name:
 HAYNES, CHAUNCY E

 Address:
 6118 EASTFIELD TRAIL
 Address:
 PO BOX 10835

 City-St-Zip:
 TALLAHASSEE, FL 32317
 City-St-Zip:
 TALLAHASSEE, FL 32302

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 KIRKSEY, OTIS W
 Name:
 OWENS, TORAINO S

 Address:
 89 SAND PINE TRAIL
 Address:
 PO BOX 20603

City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: TALLAHASSEE, FL 32316

Title: S () Delete Title: S (X) Change () Addition

Name: SMITH, MICHAEL J Name: SMITH, MICHAEL J

Address: PO BOX 6895 Address: 2700 W. PENSACOLA STREET, 2511

City-St-Zip: TALLAHASSEE, FL 32314 City-St-Zip: TALLAHASSEE, FL 32304

 Name:
 FARMER, KELVIN D
 Name:
 FARMER, KELVIN D

 Address:
 PO BOX 6895
 Address:
 6317 DUCK CALL COURT

 City-St-Zip:
 TALLAHASSEE, FL 32314
 City-St-Zip:
 TALLAHASSEE, FL 32309

 Name:
 MOORE, MICHAEL R
 Name:

 Address:
 2901 TYRON CIRCLE
 Address:

 City-St-Zip:
 TALLAHSSEE, FL 32309
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LANE, ERNEST J
 Name:

 Address:
 1324 SOUTH ADAMS STREET
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32301
 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: MICHAEL J.L. SMITH S 05/06/2008