

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715218

FILED  
Feb 19, 2008  
Secretary of State

**Entity Name:** THE JACKSONVILLE ALUMNI CHAPTER OF THE KAPPA ALPHA PSI FRATERNITY, INC.

**Current Principal Place of Business:**

3717 MONCRIEF ROAD WEST  
JACKSONVILLE, FL 32209 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 40625  
JACKSONVILLE, FL 32301 US

**New Mailing Address:**

PO BOX 40625  
JACKSONVILLE, FL 32203 US

**FEI Number:** 59-6152197

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLINS, JULIUS L  
1382 BROOKWOOD FOREST BLVD.  
110  
JACKSONVILLE, FL 32225 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: P/D ( ) Delete  
Name: MOORE, ALLEN L SR  
Address: 861 GRAYBAR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP/D ( ) Delete  
Name: FERGUSON, CLEVELAND III  
Address: 12267 HAWKSTOWE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: S/D ( ) Delete  
Name: COLLINS, JULIUS L  
Address: 1382 BROOKWOOD FOREST BLVD  
City-St-Zip: JACKSONVILLE, FL 32225

Title: T/D ( ) Delete  
Name: HINES, WILLIAM C II  
Address: 5811 ATLANTIC BLVD #243  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: CUNNINGHAM, THOMAS L  
Address: 144 PINEHURST POINT DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D ( ) Delete  
Name: MCCAULEY, RONALD A  
Address: 3264 RACQUET COURT  
City-St-Zip: JACKSONVILLE, FL 32277

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: MOORE, ALLEN L SR  
Address: 8611 GRAYBAR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

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

Title: S/D (X) Change ( ) Addition  
Name: COLLINS, JULIUS L  
Address: 1382 BROOKWOOD FOREST BLVD #110  
City-St-Zip: JACKSONVILLE, FL 32225

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: JULIUS L. COLLINS

S/D

02/19/2008

Electronic Signature of Signing Officer or Director

Date