2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006994

FILED Jan 06, 2011 Secretary of State

Entity Name: KAPPA PSI KAPPA FRATERNITY, INC.

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

1443 SO 17TH STREET APT 2

PHILADELPHIA, PA 19146

Current Mailing Address: New Mailing Address:

P.O. BOX 733 P.O. BOX 7402

PHILADELPHIA, PA 19105 ROCKY MOUNT, NC 27804

FEI Number: 38-3642674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RABY, DEDRICK J

KAPPA PSI KAPPA FRATERNTIY, INC.

1400 DISSTON STREET

TALLALIASSEE EL 20210 LIS

TALLAHASSEE, FL 32310 US TALLAHASSEE, FL 32310 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: TOCOBY C. MCCOY 01/06/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: SP

Name: WALKER, HENRY Address: P.O. BOX 7402

City-St-Zip: ROCKY MOUNT, NC 27804

Title: 1SAP

Name: RABY, DEDRICK Address: P.O. BOX 7402

City-St-Zip: ROCKY MOUNT, NC 27804

Title: 2SAP

Name: JOHNSON, TERRELL Address: P.O. BOX 7402

City-St-Zip: ROCKY MOUNT, NC 27804

Title: SEC

Name: RIVERS, DEJUANE Address: P.O. BOX 7402

City-St-Zip: ROCKY MOUNT, NC 19102

Title: TREA

Name: MCCOY, TOCOBY Address: P.O. BOX 7402

City-St-Zip: ROCKY MOUNT, NC 27804

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: TOCOBY C MCCOY TREA 01/06/2011