

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000331

FILED
Mar 02, 2010
Secretary of State

Entity Name: KAIROS MANAGEMENT CONSULTANTS, INC

Current Principal Place of Business:

8210 FLORIDA DRIVE
2-233
PEMBROKE PINES, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

8210 FLORIDA DRIVE
2-233
PEMBROKE PINES, FL 33025 US

New Mailing Address:

FEI Number: 65-1007556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRANT, FITZ-ALBERT
5100 SW 41ST IE HIGHWAY
PEMBROKE PARK, FL 33023 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: PD
Name: LEWIS-HUTCHINSON, WAYNE
Address: 8210 FLORIDA DRIVE, #2-233
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D
Name: MCKINNEY, ALBERTA
Address: 14815 NW 11 COURT
City-St-Zip: MIAMI, FL 33168

Title: VP
Name: GRANT, ZERONIE N PHD
Address: 8210 FLORIDA DRIVE #2-233
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D
Name: GRAY, REGINA
Address: 901 NW 141 STREET
City-St-Zip: MIAMI, FL 33168

Title: SD
Name: EASON, REGINA PHD
Address: 2508 SUPERIOR STREET
City-St-Zip: OPA LOCKA, FL 33054

Title: TD
Name: BENTLEY, GRETTEL MBA
Address: 14510 NW 13TH AVENUE
City-St-Zip: MIAMI, FL 33168

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: ZERONIE N. GRANT

VP

03/02/2010

Electronic Signature of Signing Officer or Director

Date