

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007155

FILED  
Mar 10, 2011  
Secretary of State

Entity Name: ALPHA PSI KAPPA FRATERNITY, INC.

## Current Principal Place of Business:

1504 NW 56TH AVE.  
LAUDERHILL, FL 33313

## New Principal Place of Business:

1504 NW 56TH AVE.  
SUITE 404  
LAUDERHILL, FL 33313 US

## Current Mailing Address:

P. O. BOX 210176  
COLUMBIA, SC 29221

## New Mailing Address:

P. O. BOX 210176  
SUITE 404  
COLUMBIA, SC 29221 US

FEI Number: 26-0549045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CANDICE, FLOURNOY  
1504 NW 56TH AVENUE  
LAUDERHILL, FL 33313 US

## Name and Address of New Registered Agent:

CANDICE, FLOURNOY  
1504 NW 56TH AVENUE  
SUITE 404  
LAUDERHILL, FL 33313 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: CANDICE FLOURNOY

03/10/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: GREEN, MARIA PRES  
Address: P. O. BOX 210176  
City-St-Zip: COLUMBIA, SC 29221 US

Title: T  
Name: SUBER, CRYSTAL N SECRETA  
Address: 20405 WILLIAMS ST  
City-St-Zip: PETERSBURG, VA 23803 US

Title: VP  
Name: MELLS, LATANYA ANTI-P  
Address: 339 AIRPORT PLACE  
City-St-Zip: HIGHLAND SPRINGS, VA 23075 US

Title: AVP  
Name: DAVIS, MARLENE 3ANTI-P  
Address: 7601 BELASCO DR APT E  
City-St-Zip: RICHMOND, VA 23225 US

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: CRYSTAL N. SUBER

ST

03/10/2011

Electronic Signature of Signing Officer or Director

Date