

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000005450

FILED  
Oct 10, 2007  
Secretary of State

**Entity Name:** KAPPA ALPHA PSI GUIDE RIGHT FOUNDATION OF ST. PETERSBURG, INC

**Current Principal Place of Business:**

1843 53 CIR S  
ST PETERSBURG, FL 33712

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 12066  
ST PETERSBURG, FL 337332066

**New Mailing Address:**

**FEI Number:** 56-2473863      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

CUTLIFF, YATE K  
501 1 AVE N STE 507  
ST PETERSBURG, FL 33701      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: YATE K. CUTLIFF

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TELLIS, JEROME  
Address: 1843 53 CIR S  
City-St-Zip: ST PETERSBURG, FL 33712

Title: V ( ) Delete  
Name: KEYS, LASHANTE  
Address: 701 58 AVE S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: T ( ) Delete  
Name: COLQUITT, CHARLIE  
Address: 1820 SERPENTINE DR S  
City-St-Zip: ST PETERSBURG, FL 33712

Title: S ( ) Delete  
Name: STUBBS, TOMA  
Address: 1620 58TH AVE SO. #5  
City-St-Zip: ST PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: STOKES, ROBERT  
Address: 4020 40TH CIRCLE S  
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: D ( ) Delete  
Name: GORDON, KEVIN  
Address: 3011 59TH AVE S  
City-St-Zip: SAINT PETERSBURG, FL 33712

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

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

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

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

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: JEROME TELLIS

P

10/10/2007

Electronic Signature of Signing Officer or Director

Date