

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008391

FILED  
Apr 16, 2011  
Secretary of State

**Entity Name:** ETA KAPPA LAMBDA EDUCATION FOUNDATION, INC.

**Current Principal Place of Business:**

5456 NW MODEL CT.  
PORT ST. LUCIE, FL 34986 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4471  
FORT PIERCE, FL 34948 US

**New Mailing Address:**

**FEI Number:** 26-3290754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PERRY, KEVIN G  
5456 NW MODEL CT.  
PORT ST. LUCIE, FL 34986 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:** PRES  
**Name:** PERRY, KEVIN G  
**Address:** 5456 NW MODEL CT  
**City-St-Zip:** PORT ST. LUCIE, FL 34986 US

**Title:** VP  
**Name:** GORE, WILLIE  
**Address:** PO BOX 820  
**City-St-Zip:** PORT SALERNO, FL 34992 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:** KEVIN G. PERRY

PRES

04/16/2011

Electronic Signature of Signing Officer or Director

Date