

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001891

FILED  
Apr 18, 2011  
Secretary of State

**Entity Name:** MU PSI HOUSING CORPORATION, INC.

**Current Principal Place of Business:**

4512 BLACK KNIGHT DR.  
ORLANDO, FL 32817 US

**New Principal Place of Business:**

**Current Mailing Address:**

10440 NW 21 ST  
PEMBROKE PINES, FL 33026 US

**New Mailing Address:**

**FEI Number:** 27-2307590

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HALL, SHELDON T  
3620 BECONTREE PLACE  
OVIEDO, FL 32765 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: P  
Name: SHIPPEE, JOSEPH B  
Address: 10249 SECRET HARBOR COURT  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP  
Name: WELTER, CHRISTOPHER L  
Address: 10440 NW 21 ST  
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: VP  
Name: MAHER, MICHAEL J  
Address: 1135 NORTH VERNON ST  
City-St-Zip: ARLINGTON, VA 22201 US

Title: VP  
Name: AINSWORTH, JEFF  
Address: 650 NORTH ORANGE AVE #41 06  
City-St-Zip: ORLANDO, FL 32801 US

Title: VP  
Name: CROWLEY, CHRISTOPHER J  
Address: 155 SOUTH COURT AVE #1904  
City-St-Zip: ORLANDO, FL 32801 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: CHRISTOPHER WELTER

VP

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date