

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000001891

**FILED**  
**Apr 17, 2012**  
**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:**

133 RESERVE CIRCLE, APT 101  
OVIEDO, FL 32765 US

**Current Mailing Address:**

10440 NW 21 ST  
PEMBROKE PINES, FL 33026 US

**New Mailing Address:**

1629 SONG SPARROW CT  
SANFORD, FL 32773 US

**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: PRITCHETT, WILLIAM L  
Address: 133 RESERVE CIRCLE, APT 101  
City-St-Zip: OVIEDO, FL 32765 US

Title: VP  
Name: TEATER, JOSHUA K  
Address: 1629 SONG SPARROW CT  
City-St-Zip: SANFORD, FL 32773 US

Title: VP  
Name: PEREZ, NICHOLAS M  
Address: 133 RESERVE CIRCLE, APT 101  
City-St-Zip: OVIEDO, FL 32765 US

Title: VP  
Name: ZAJICEK, JOHN M  
Address: 1979 SUMMER CLUB DR. APT 215  
City-St-Zip: OVIEDO, FL 32765 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:** JOSHUA K. TEATER

VP

04/17/2012

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

\_\_\_\_\_  
Date