2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# N93000005265

Entity Name: KAPPA ALPHA PSI FOUNDATION, INC.

Current Principal Place of Business:

707 NW 22 ND ROAD
NA
FT LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 21
FORT LAUDERDALE, FL 333020021 US

New Mailing Address:

FEI Number: 65-0474137 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENNEDY, ARTHUR W
1631 NW 24TH TERR
FORT LAUDERDALE, FL 33311 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:	T	( ) Delete
Name:	KENNEDY, ARTHUR W	
Address:	1631 NW 24TH TERR	
City-St-Zip:	FORT LAUDERDALE, FL 33311 US	
Title:	D	( ) Delete
Name:	HALL, ARTIS	
Address:	7541 N.W. 12TH ST.	
City-St-Zip:	PLANTATION, FL 33313 US	
Title:	S	( ) Delete
Name:	SWORN, SAMUEL	
Address:	1508 NW 3RD WAY	
City-St-Zip:	POMPANO BEACH, FL 33060 US	
Title:	P	( ) Delete
Name:	GORDON, MERRITT	
Address:	2781 NW 26 AVE	
City-St-Zip:	OAKLAND PARK, FL 33311 US	
Title:	D	( ) Delete
Name:	JACKSON, CLARENCE	
Address:	4361 NW 12 COURT	
City-St-Zip:	LAUDERHILL, FL 33313 US	
Title:	VP	( ) Delete
Name:	GREEN, ROBERT	
Address:	7430 NW 41 COURT	
City-St-Zip:	LAUDERHILL, FL 33319 US	

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: ARTHUR W. KENNEDY AGEN 04/22/2009

Electronic Signature of Signing Officer or Director — Date