

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001762

FILED  
Apr 08, 2010  
Secretary of State

**Entity Name:** ETA KAPPA LAMBDA CHAPTER--ALPHA PHI ALPHA FRATERNITY, INC.

**Current Principal Place of Business:**

2531 SW FONDURA ROAD  
PORT SAINT LUCIE, FL 34953 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1371  
FT PIERCE, FL 34954

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WOOD, KAHARI T  
2531 SW FONDURA ROAD  
PORT SAINT LUCIE, FL 34953 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: HINTON, LEWIS JR  
Address: 4401 EVERGREEN AVE.  
City-St-Zip: FORT PIERCE, FL 34947 US

Title: VP  
Name: NOEL, JOSEPH  
Address: 5620 SPANISH RIVER RD.  
City-St-Zip: FORT PIERCE, FL 34951 US

Title: T  
Name: CORNETT, JULLIAN  
Address: 5796 N.W. BELWOOD CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: FS  
Name: WOOD, KAHARI T  
Address: 2531 SW FONDURA ROAD  
City-St-Zip: PORT SAINT LUCIE, FL 349453 US

Title: RS  
Name: GORE, WILLIE  
Address: P.O. BOX 820  
City-St-Zip: PORT SALERNO, FL 34992 US

Title: D  
Name: PERRY, KEVIN  
Address: 5456 NW MODEL COURT  
City-St-Zip: PORT SAINT LUCIE, FL 34986 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: KAHARI T. WOOD

FS

04/08/2010

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

\_\_\_\_\_  
Date