

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000846

FILED
Feb 10, 2010
Secretary of State

Entity Name: SARASOTA/BRADENTON KAPPA ALPHA PSI - PROJECT GUIDE RIGHT, INC.

Current Principal Place of Business:

3925 TRENTWOOD PLACE
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 573
TALLEVAST, FL 34270

New Mailing Address:

FEI Number: 65-0910261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOBLEY, ALPHONZA
3925 TRENTWOOD PLACE
SARASOTA, FL 34243 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: MOBLEY, ALFONZA
Address: 3925 TRENTWOOD PLACE
City-St-Zip: SARASOTA, FL 34243

Title: VP
Name: LEWIS, STEVE
Address: 3320 38TH TERRACE EAST
City-St-Zip: BRADENTON, FL 34208

Title: S
Name: DAWKINS, TIM
Address: 6808 46TH TERRECE EAST
City-St-Zip: BRADENTON, FL 34208

Title: T
Name: LEAKS, CURTIS
Address: PO BOX 727
City-St-Zip: BRADENTON, FL 34206

Title: BOD
Name: EDWARDS, OMAR
Address: 3610 4TH AVENUE NE
City-St-Zip: BRADENTON, FL 34208

Title: BOD
Name: HENRY, AARON
Address: 4992 CREEKSIDE TRAIL
City-St-Zip: SARASOTA, FL 34243

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: ALFONZA MOBLEY

P

02/10/2010

Electronic Signature of Signing Officer or Director

Date