

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006226

FILED
Mar 01, 2006
Secretary of State

Entity Name: COMPASSION & CHOICES (INCORPORATED)

Current Principal Place of Business:

4100 E. MISSISSIPPI, SUITE 700
GLENDALE, CO 802463048

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 101810
DENVER, CO 802501810

New Mailing Address:

FEI Number: 84-1328829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLAMM, DONNA M
9005-H SCARSDALE COURT
W. MELBOURNE, FL 329042012 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: B () Delete
Name: SPIERS, PAUL
Address: 14 STRAWBERRY HILL LANE
City-St-Zip: DANVERS, MA 019231133

Title: C () Delete
Name: BRODY, ROBERT V
Address: 431 BELVEDERE
City-St-Zip: SAN FRANCISCO, CA 94117

Title: B () Delete
Name: HOAGLAND, MARY
Address: 355 GARFIELD STREET
City-St-Zip: DENVER, CO 80206

Title: CFO () Delete
Name: CAMPBELL, MARCIA A
Address: 1535 E NICHOLS DR
City-St-Zip: CENTENNIAL, CO 80122

Title: CEO () Delete
Name: TEMPLE, MARSHA A
Address: 4100 E MISSISSIPPI
City-St-Zip: GLENDALE, CO 80246

Title: B () Delete
Name: LOKER, CHRIS
Address: 9 ASPENWALL COURT
City-St-Zip: ORINDA, CA 94563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: B (X) Change () Addition
Name: ROBINSON, KIRK
Address: 2843 PROSCH AVE W
City-St-Zip: SEATTLE, WA 98119

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 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: MARCIA A CAMPBELL

CFO

03/01/2006

Electronic Signature of Signing Officer or Director

_____ Date