

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Apr 26, 2007 8:00 am**  
**Secretary of State**

04-26-2007 90036 023 \*\*\*\*\*50.00

**DOCUMENT # M01000001865**

1. Entity Name

COMPASS ONE, LLC



Principal Place of Business

Mailing Address

2400 YORKMONT ROAD  
CHARLOTTE NC 28217

2400 YORKMONT ROAD  
ATTN TAX DEPARTMENT  
CHARLOTTE NC 28217

2. Principal Place of Business - No P.O. Box #

2400 Yorkmont Rd

3. Mailing Address

40 Tax Dept

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2400 Yorkmont Rd

City & State

Charlotte NC

City & State

Charlotte NC

Zip

28217

Country

USA

Zip

28217

Country

USA

4. FEI Number

56-2256673

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

1st MOORE

CR2E083 (10/06)



6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-instating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

|                 |                     |  |
|-----------------|---------------------|--|
| TITLE           | P                   | <input checked="" type="checkbox"/> Delete |
| NAME            | ONDROF, THOMAS G    |  |
| STREET ADDRESS  | 2400 YORKMONT ROAD  |  |
| CITY - ST - ZIP | CHARLOTTE NC 28217  |  |
| TITLE           | T                   | <input checked="" type="checkbox"/> Delete |
| NAME            | ZAUF, GARY S        |  |
| STREET ADDRESS  | 2400 YORKMONT ROAD  |  |
| CITY - ST - ZIP | CHARLOTTE NC 28217  |  |
| TITLE           | AS                  | <input checked="" type="checkbox"/> Delete |
| NAME            | BRIOTTE, KRISTIN    |  |
| STREET ADDRESS  | 2400 YORKMONT ROAD  |  |
| CITY - ST - ZIP | CHARLOTTE NC 28217  |  |
| TITLE           | AS                  | <input checked="" type="checkbox"/> Delete |
| NAME            | ROSSITCH, RICHARD J |  |
| STREET ADDRESS  | 2400 YORKMONT ROAD  |  |
| CITY - ST - ZIP | CHARLOTTE NC 28217  |  |
| TITLE           | AS                  | <input checked="" type="checkbox"/> Delete |
| NAME            | DELANO, DEBORAH     |  |
| STREET ADDRESS  | 2400 YORKMONT ROAD  |  |
| CITY - ST - ZIP | CHARLOTTE NC 28217  |  |
| TITLE           | SVPG                | <input checked="" type="checkbox"/> Delete |
| NAME            | WELLS, C PHILLIP    |  |
| STREET ADDRESS  | 2400 YORKMONT ROAD  |  |
| CITY - ST - ZIP | CHARLOTTE NC 28217  |  |

10. ADDITIONS/CHANGES

|                 |                       |  |
|-----------------|-----------------------|--|
| TITLE           | Sole member           | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME            | Compass Group USA Inc |  |
| STREET ADDRESS  | 2400 Yorkmont Road    |  |
| CITY - ST - ZIP | Charlotte NC 28217    |  |
| TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME            |                       |  |
| STREET ADDRESS  |                       |  |
| CITY - ST - ZIP |                       |  |
| TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME            |                       |  |
| STREET ADDRESS  |                       |  |
| CITY - ST - ZIP |                       |  |
| TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME            |                       |  |
| STREET ADDRESS  |                       |  |
| CITY - ST - ZIP |                       |  |
| TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME            |                       |  |
| STREET ADDRESS  |                       |  |
| CITY - ST - ZIP |                       |  |

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

C. Phillip Wells C. Phillip Wells

4/17/07

ATTACHMENT

60041278

# 1101000001865

**COMPASS ONE, LLC**  
**Corporate Data Sheet**

**Corporation Name:** Compass One, LLC  
**Address:** 2400 Yorkmont Road  
Charlotte, NC 28217  
**FEIN Number:** 56-2256673

**Officers:**

| <u>Name</u>         | <u>Office</u>                                      |
|---------------------|--|
| Thomas G. Ondrof    | President  |
| C. Phillip Wells    | Senior Vice President, General Counsel & Secretary |
| Gary Z. Zauf        | Treasurer  |
| Kristin E. Briotte  | Assistant Secretary                                |
| Deborah K. Delano   | Assistant Secretary-Tax                            |
| Richard J. Rossitch | Assistant Secretary                                |
| Nicole Tharrington  | Assistant Secretary                                |
| Laurence B. Jones   | Assistant Secretary                                |

\*No Directors. This is a member-managed LLC with Compass Group USA, Inc. being the sole member.