2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGI

Apr 20, 2006 8:00 am Secretary of State DOCUMENT # M01000001866 1. Entity Name 04-20-2006 90036 020 ****50.00 COMPASS TWO, LLC Principal Place of Business Mailing Address C/O TAX DEPT 2400 YORK MONT RD CHARLOTTE NC 28217 2400 YORKMONT ROAD CHARLOTTE NC 28217 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State Applied For City & State FEI Number 56-2256592 Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION:FL 33324 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, typisd or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. Pres Change TITLE TITLE VCPE ☐ Delete Indition I NAME NAME ONDROF, THOMAS G STREET ADDRESS STREET ADDRESS 2400 YORKMONT RD CTTY-ST-ZIP **CHARLOTTE NC 28217** CITY-ST-ZIP Delete ☐ Addition TITLE ☐ Change NAME NAME ZAUF, GARY Z STREET ADDRESS 2400 YORKMANT RD STREET ANDRESS CITY-ST-ZIP CITY-ST-7iP **CHARLOTTE NC 28217** TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME MAME DELANO, DEBORAH K STREET ADDRESS STREET ADDRESS 2400 YORKMONT RD CITY-ST-ZIP CITY-ST-ZIP CHARLOTTE NC 28217 Sr. VP GenCourse 1+ Sec Change Change TITLE Delete TITLE Addition Addition NAME WELLS, PHILLIP C NAME STREET ADDRESS STREET ADDRESS 2400 YORKMONT RD CITY-ST-ZIP **CHARLOTTE NC 28217** CITY-ST-ZIP nne ☐ Delete Change ☐ Addition BRIOTTE, KRISTINE E NAME 2400 YORKMONT RD STREET ADDRESS STREET ADDRESS CHARLOTTE NC 28217 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition ROSSITCH, RICHARD J NAME NAME 2400 YORKMAN RD STREET ADDRESS STREET ADDRESS CHARLOTTE NC 28217 CITY-ST- AP 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.

FILED

Compass Two, UC

ATTACHMENT

20033757

Officers:

Office

Thomas G. Ondrof C. Phillip Wells

frof President
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.

Mailing Address: Yo Tax Department 2400 Yorkmans Road Charlotte NC 28211