2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V21630

Entity Name: COMPSYS, INC

FILED Feb 02, 2006 Secretary of State

y		o, 1140.			
Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
4255 DOW MELBOUR	/ ROAD RNE, FL 32940		4255 DOW ROAD MELBOURNE, FL 329	4255 DOW ROAD MELBOURNE, FL 32934	
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
4255 DOW ROAD MELBOURNE, FL 32940			4255 DOW ROAD MELBOURNE, FL 329	4255 DOW ROAD MELBOURNE, FL 32934	
FEI Number	: 59-3115690	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
JOHNSON, KEITH 4255 DOW ROAD MELBOURNE, FL 32940 US			JOHNSON, KEITH 4255 DOW ROAD MELBOURNE, FL 329:	,	
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				02/02/2006	
	Electror	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () LEWIT, SCOTT 1975 RIVERSH INDIALANTIC, I	IORE DRIVE	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PETERSON, C 295 SEACRES		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MANLEY, T. RO 8535 S. TROPI MERRITT ISLA	CAL TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	REICHARD, RO 788 ACACIA AV		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VTD ()) Delete	Title:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: KEITH JOHNSON VTD 02/02/2006

JOHNSON, KEITH G

INDIALANTIC, FL 32903

2835 HIGHWAY A1A NORTH, #704

Name:

Address:

City-St-Zip: