

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V21630

Entity Name: COMPSYS, INC.

Current Principal Place of Business:

4255 DOW ROAD
MELBOURNE, FL 32934

Current Mailing Address:

4255 DOW ROAD
MELBOURNE, FL 32934

FEI Number: 59-3115690

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWIT, SCOTT
4255 DOW ROAD
MELBOURNE, FL 32934 US

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

Officer/Director Detail :

Title PD
Name LEWIT, SCOTT M
Address 1975 RIVERSHORE DRIVE
City-State-Zip: INDIALANTIC FL 32903

Title D
Name TAIBL, RON
Address 4934 PINOT STREET
City-State-Zip: VIERA FL 32955

Title D
Name MANLEY, T. ROGER
Address 8535 S. TROPICAL TRAIL
City-State-Zip: MERRITT ISLAND FL 32952

Title CD
Name REICHARD, RONNAL P
Address 3722 PASCOLI PLACE
City-State-Zip: MELBOURNE FL 32934

Title D
Name JOHNSON, KEITH G
Address 2835 HIGHWAY A1A NORTH, #704
City-State-Zip: INDIALANTIC FL 32903

Title T,D
Name BARTCZAK, KEVIN J
Address 1505 N HWY A1A #203
City-State-Zip: INDIALANTIC FL 32903

Title SECRETARY
Name BAKER, PATRICIA
Address 4255 DOW ROAD
City-State-Zip: MELBOURNE FL 32934

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

SIGNATURE: PATRICIA BAKER

SECRETARY

02/03/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date