

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F23000003017

**Entity Name:** COMPULSE ENTERPRISES, INC

**Current Principal Place of Business:**

10706 BEAVER DAM ROAD  
COCKEYSVILLE, MD 21030

**Current Mailing Address:**

10706 BEAVER DAM ROAD  
COCKEYSVILLE, MD 21030 US

**FEI Number:** 46-3108015

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT/CEO  
Name            RIPLEY, CHRISTOPHER S.  
Address        10706 BEAVER DAM ROAD  
City-State-Zip: COCKEYSVILLE MD 21030

Title            TREASURER/CFO  
Name            RUTISHAUSER, LUCY  
Address        10706 BEAVER DAM ROAD  
City-State-Zip: COCKEYSVILLE MD 21030

Title            VICE PRESIDENT OF TAX  
Name            NESTEROVSKY, PAUL E.  
Address        10706 BEAVER DAM ROAD  
City-State-Zip: COCKEYSVILLE MD 21030

Title            DIRECTOR  
Name            RIPLEY, CHRISTOPHER S.  
Address        10706 BEAVER DAM ROAD  
City-State-Zip: COCKEYSVILLE MD 21030

Title            DIRECTOR  
Name            SMITH, DAVID D.  
Address        10706 BEAVER DAM ROAD  
City-State-Zip: COCKEYSVILLE MD 21030

*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:** PAUL E. NESTEROVSKY

**VICE PRESIDENT OF TAX    03/22/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date