

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000846

FILED  
Jan 24, 2006  
Secretary of State

Entity Name: COMPASS LENDING CORPORATION

**Current Principal Place of Business:**

18 BALBOA COVES  
NEWPORT BEACH, CA 92663

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1552  
NEWPORT BEACH, CA 92659

**New Mailing Address:**

18 BALBOA COVES  
NEWPORT BEACH, CA 92663

FEI Number: 42-1606089

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INCORP SERVICES, INC.  
18450 NE 2ND AVE  
MIAMI, FL 33179 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CPT ( ) Delete  
Name: BALJEU, MARCO A  
Address: 18 BALBOA COVES  
City-St-Zip: NEWPORT BEACH, CA 92663

Title: VCS ( ) Delete  
Name: FOLLIOTT-BALJEU, GALE E  
Address: 18 BALBOA COVES  
City-St-Zip: NEWPORT BEACH, CA 92663

Title: DV ( ) Delete  
Name: BALJEU, BURT  
Address: 17 BALBOA COVES  
City-St-Zip: NEWPORT BEACH, CA 92663

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: MARCO A. BALJEU

CPT

01/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date