2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001143

Entity Name: THE COMPASSION FUND, INC.

FILED Feb 16, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2979 PGA BLVD 12201 BLUEGRASS PARKWAY PALM BEACH GARDENS, FL 33410 LOUISVILLE, KY 40299 US

Current Mailing Address: New Mailing Address:

2979 PGA BLVD 12201 BLUEGRASS PARKWAY PALM BEACH GARDENS, FL 33410 LOUISVILLE, KY 40299 US

FEI Number: 26-3437617 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

REGISTERED AGENT SULUTIONS, INC. 155 OFFICE PLAZA DRIVE STE A TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: CP

Name: STEIER, E. JOSEPH III
Address: 12201 BLUEGRASS PARKWAY
City-St-Zip: LOUISVILLE, KY 40299 US

Title: D\

Name: TIMMERING, DIANNE

Address: 12201 BLUEGRASS PARKWAY City-St-Zip: LOUISVILLE, KY 40299 US

Title: DV

Name: HARRISON, TRACY

Address: 12201 BLUEGRASS PARKWAY
City-St-Zip: LOUISVILLE, KY 40299 US

Title: DS

Name: ADAMS, SANDRA L

Address: 12201 BLUEGRASS PARKWAY
City-St-Zip: LOUISVILLE, KY 40299 US

Title: DT

Name: HARRISON, JOHN

Address: 12201 BLUEGRASS PARKWAY
City-St-Zip: LOUISVILLE, KY 40299 US

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

SIGNATURE: SANDRA ADAMS VP 02/16/2011