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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUN 30 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K63027
1. Corporation Name

COMPASS TECHNOLOGY, INC.

Principal Place of Business Mailing Address
1819 Main Street 1819 Main Street
Suite 900 Suite 900
Sarasota, FL 34236 Sarasota, FL 34236
USA USA

3. Date Incorporated or Qualified 01-25-89
2a. Date of Last Report 01/19/96
4. FEI Number 65-0094557 Applied for Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 1001 Murphy Ranch Road 26 1001 Murphy Ranch Road, 08-02
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 Tax Department, 08-02 27 Tax Department, 08-02
City & State City & State
23 Milpitas, California 28 Milpitas, CA 95035-7912
Zip Country Zip Country
24 95035-7912 25 USA 29 95035-7912 30 USA

9. Name and Address of Current Registered Agent
Roberts, James L.
1819 Main Street
Suite 900
Sarasota, FL 34236

10. Name and Address of New Registered Agent
81 Name C T Corporation System
82 Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road
83
84 City Plantation, FL 85 Zip Code 33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE _____ (NAME) _____ (DATE)

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes President, Vice President, Treasurer, and Secretary.

Table with 5 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes President West, W. Michael.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James F. Engle JAMES F. ENGLE TREASURER 25-June-97 408-324-3310

CR2E034 (8/95)