

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092425

FILED
Aug 20, 2007
Secretary of State

Entity Name: COMPASS HOSPITALITY GROUP, LLC

Current Principal Place of Business:

1386 EAST VINE STREET
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

1386 EAST VINE STREET
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 86-1141523 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FORM-A-CORP LLC
100 VILLAGE SQUARE CROSSING
SUITE 103
PALM BEACH GARDENS, FL 33410 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TAKX, DOMIEN
Address: 1386 EAST VINE STREET
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGRM () Delete
Name: DILLARD, RANDY
Address: 1386 EAST VINE STREET
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGRM () Delete
Name: TAKX, LORRAINE
Address: 1386 EAST VINE STREET
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGRM () Delete
Name: DILLARD, MARYJO
Address: 1386 EAST VINE STREET
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES:

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

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RANDY DILLARD

PRES

08/20/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date