

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000001165

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** COMPASSION FUND OF ORANGE, LLC

**Current Principal Place of Business:**

2979 PGA BLVD.  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

12201 BLUEGRASS PARKWAY  
LOUISVILLE, KY 40299 US

**Current Mailing Address:**

2979 PGA BLVD.  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

12201 BLUEGRASS PARKWAY  
LOUISVILLE, KY 40299 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DRIVE, SUITE A  
TALLAHASSEE, FL 32301 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: THE COMPASSION FUND, INC.  
Address: 12201 BLUEGRASS PARKWAY  
City-St-Zip: LOUISVILLE, KY 40299 US

I hereby 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: SANDRA ADAMS

VP

02/17/2011

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