

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am  
Secretary of State

05-02-2001 90211 005 \*\*\*\*61.25

0036129

DOCUMENT # N00000001595

1. Entity Name

COMPASSION CONNECTION INT'L INC.

Principal Place of Business

4021 N.E. 2ND TERRACE  
POMPANO BEACH FL 33064

Mailing Address

4021 N.E. 2ND TERRACE  
POMPANO BEACH FL 33064

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0997642

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ALLEN, DESRENE A  
4021 N.E. 2ND TERRACE  
POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME ALLEN, DESRENE A  
STREET ADDRESS 4021 N.E. 2ND TERRACE  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE VD ☒ Delete  
NAME THOMPSON, LEROY  
STREET ADDRESS 3021 N.W. 40TH ST  
CITY-ST-ZIP LAUDERDALE LAKES FL 33309

TITLE SD ☒ Delete  
NAME GIBBS, CLAUDETTE  
STREET ADDRESS 2420 SW 5TH STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE TD ☐ Delete  
NAME HIBBERT, ELVENA  
STREET ADDRESS 3370 NW 14TH PLACE  
CITY-ST-ZIP FORT LAUDERDALE FL 33311

TITLE D ☐ Delete  
NAME ALLEN, KEITH  
STREET ADDRESS 4021 N.E. 2ND TERRACE  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE D ☒ Delete  
NAME PEART, DAPHNE  
STREET ADDRESS 5717 BOYNTON CLOVE WAY  
CITY-ST-ZIP BOYNTON BEACH FL 33437

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☒ Change ☐ Addition  
NAME Webster Bartley  
STREET ADDRESS 3754 Jackson Blvd  
CITY-ST-ZIP Fort Lauderdale 33312

TITLE S ☒ Change ☐ Addition  
NAME Venice McKenuff  
STREET ADDRESS 4021 NE 2nd Terrace  
CITY-ST-ZIP Pompano Beach FL 33064

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition  
NAME Joyce Nairne  
STREET ADDRESS 3724 Jackson Blvd  
CITY-ST-ZIP Fort Lauderdale 33312

12. I 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Desrene Allen* *DESRENE ALLEN* 04-23-01 (919) 532-3149  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)