

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000005019

**FILED**  
**Jun 09, 2010**  
**Secretary of State**

**Entity Name:** COMPASS POINT CHURCH, INC.

**Current Principal Place of Business:**

2270 GRIFFIN ROAD  
LAKELAND, FL 33810

**New Principal Place of Business:**

2110 SYLVESTER RD  
SUITE 5  
LAKELAND, FL 33803

**Current Mailing Address:**

2270 GRIFFIN ROAD  
LAKELAND, FL 33810

**New Mailing Address:**

2110 SYLVESTER RD  
SUITE 5  
LAKELAND, FL 33803

**FEI Number:** 20-1373236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ELROD, CHRISTOPHER D  
1423 CAMP GILEAD DRIVE  
POLK CITY, FL 33868 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ELROD, CHRISTOPHER D  
**Address:** 1423 CAMP GILEAD DR.  
**City-St-Zip:** POLK CITY, FL 33868

**Title:** V  
**Name:** KYLE, BRIDGES  
**Address:** 3603 WEST WHEELER ROAD  
**City-St-Zip:** LAKELAND, FL 33810

**Title:** T  
**Name:** SIGEL, BOB  
**Address:** 8805 TOM COSTINE ROAD  
**City-St-Zip:** LAKELAND, FL 33809

**Title:** S  
**Name:** FORTUNE, WESLEY  
**Address:** 504 NORTH TENNESSEE AVENUE  
**City-St-Zip:** LAKELAND, FL 33801

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:** CHRISTOPHER D. ELROD

P

06/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date