

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006384

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: COMPASSION ALLIANCE, INC.

**Current Principal Place of Business:**

6315 S. RIVERGLEN RD.  
OZARK, MO 65721 US

**New Principal Place of Business:**

1609 N. HWY CC  
NIXA, MO 65714 US

**Current Mailing Address:**

6315 S. RIVERGLEN  
OZARK, MO 65721 US

**New Mailing Address:**

PO BOX 989  
NIXA, MO 65714 US

FEI Number: 84-1651362

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOORE, RYAN  
6542 SW 63RD COURT  
OCALA, FL 34474 US

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

EWING, STEVEN R  
5580 SE 3TH PLACE  
OCALA, FL 34471 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: STEVEN R. EWING

04/24/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HOULIHAN, ROBERT DR.  
Address: 6315 S. RIVERGLEN RD.  
City-St-Zip: OZARK, MO 65721 US

Title: T ( ) Delete  
Name: BURDINE, DAVID  
Address: 14960 PRISTINE DR.  
City-St-Zip: COLORADO SPRINGS, CO 80921 US

Title: VP ( ) Delete  
Name: KIM, NAM S DR.  
Address: 130-30 31ST AVE.  
City-St-Zip: FLUSHING, NY 11354 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: FONTENOT, SCOTT  
Address: 6750 STATE HWY 303  
City-St-Zip: BREMERTON, WA 98311 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT HOULIHAN

P

04/24/2006

Electronic Signature of Signing Officer or Director

Date