

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006622

FILED
May 28, 2009
Secretary of State

Entity Name: COMPASSION WORLDWIDE INC

Current Principal Place of Business:

6422 HARNEY ROAD
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

7009 CONIFER DRIVE
TAMPA, FL 33637

New Mailing Address:

FEI Number: 20-3451218 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

STUTTS, CLYDE
7009 CONIFER DRIVE
TAMPA, FL 33637 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STUTTS, CLYDE H
Address: 7009 CONIFER DRIVE
City-St-Zip: TAMPA, FL 33637

Title: VD () Delete
Name: FRANKS, DEGRANDO
Address: 7009 CONIFER DRIVE
City-St-Zip: TAMPA, FL 33637

Title: SD () Delete
Name: KINSER, MICHELE
Address: 7009 CONIFER DRIVE
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: CLYDE H. STUTTS

PD

05/28/2009

Electronic Signature of Signing Officer or Director

Date