

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002531

FILED  
Apr 29, 2011  
Secretary of State

**Entity Name:** THE COMPASS FOUNDATION, INC.

**Current Principal Place of Business:**

8209 WEST BEAVER STREET, SUITE 100  
JACKSONVILLE, FL 32220

**New Principal Place of Business:**

**Current Mailing Address:**

8209 WEST BEAVER STREET, SUITE 100  
JACKSONVILLE, FL 32220

**New Mailing Address:**

1304 ALVIS RD.  
JACKSONVILLE, FL 32220

**FEI Number:** 80-0380892

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLEN, KEVIN  
8209 WEST BEAVER STREET, SUITE 100  
JACKSONVILLE, FL 32220 US

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

ALLEN, KEVIN  
1304 ALVIS RD.  
JACKSONVILLE, FL 32220 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: \_\_\_\_\_

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: ALLEN, KEVIN  
Address: 1304 ALVIS RD.  
City-St-Zip: JACKSONVILLE, FL 32220

Title: DST  
Name: ALLEN, SHARON  
Address: 8209 WEST BEAVER STREET, SUITE 100  
City-St-Zip: JACKSONVILLE, FL 32220

Title: D  
Name: WHITE, LISA  
Address: 1371 CLOVERDALE LANE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D  
Name: FARMER, AMANDA  
Address: 1563 GRADUATION LANE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: D  
Name: FINLEY, WILLIAM  
Address: 9201 FISH RD.  
City-St-Zip: JACKSONVILLE, FL 32220

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: KEVIN ALLEN, DIRECTOR

DP

04/29/2011

Electronic Signature of Signing Officer or Director

Date