2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

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Entity Name: COMPASS-FINANCES GOD'S WAY MINISTRIES OF FLORIDA, INC.

Current Principal Place of Business:

5215 RIVER PARK VILLAS DR
SAINT AUGUSTINE, FL 32092

New Principal Place of Business:

Current Mailing Address:

5215 RIVER PARK VILLAS DR
SAINT AUGUSTINE, FL 32092

New Mailing Address:

FEI Number: 27-3728394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, GARY
8825 PERIMETER PARK BLVD SUITE 304
JACKSONVILLE, FL 32216 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: D
Name: BAXTER, MICHAEL
Address: 95235 MACKINAS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: BROWN, BENNETT
Address: 10611 DEERWOOD PARK BLVD
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: EURE, DAVID F JR
Address: 1542 KINGSLEY AVE SUITE 143
City-St-Zip: ORANGE PARK, FL 32073

Title: D
Name: MOORE, STEPHEN D JR
Address: 225 WATER ST SUITE 1800
City-St-Zip: JACKSONVILLE, FL 32202

Title: C P
Name: WHORTON, JAMES H
Address: 5215 RIVER PARK VILLAS DR
City-St-Zip: ST AUGUSTINE, FL 32092

Title: D
Name: WILLIAMS, GARY
Address: 8825 PERIMETER PARK BLVD SUITE 304
City-St-Zip: JACKSONVILLE, FL 32216

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: JAMES H WHORTON PRES 01/05/2012

Electronic Signature of Signing Officer or Director — Date