

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000003513

FILED  
Oct 20, 2014  
Secretary of State

**Entity Name:** COMPASS EDUCATION CENTER INC.

**Current Principal Place of Business:**

5809 LEGACY CRESCENT PLACE  
UNIT 301  
RIVERVIEW, FL 33578

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3597  
BRANDON, FL 33509

**New Mailing Address:**

PO BOX 3597  
BRANDON, FL 33509 US

**FEI Number:** 46-2380165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON SANDERS, CHARLANN  
LAKELAND EXECUTIVE CENTER SUITE 208  
4415 FLORIDA NATIONAL DRIVE  
LAKELAND, FL 33813 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:** CHARLANN JACKSON-SANDERS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** V  
**Name:** FOSTER, NICHELLE  
**Address:** 9509 DRAKEMILL COURT  
**City-St-Zip:** TAMPA, FL 33615

**Title:** T  
**Name:** JACOBS, XONJENESE  
**Address:** 18125 LEAMINGTON LANE  
**City-St-Zip:** TAMPA, FL 34638

**Title:** SEC  
**Name:** NYLUND, CLAY  
**Address:** 175 1ST STREET S. #1102  
**City-St-Zip:** ST. PETERSBURG, FL 33701

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:** CASSANDRA GRIGGS-FRIERSON

ED

10/20/2014

Electronic Signature of Signing Officer or Director

Date