2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N26650

Entity Name: COMPASS, INC.

The state of the s

New Principal Place of Business:

7600 SOUTH DIXIE HWY

WEST PALM BEACH, FL 33405 US

Current Mailing Address: New Mailing Address:

7600 SOUTH DIXIE HWY

WEST PALM BEACH, FL 33405 US

FEI Number: 65-0052657 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PLAKAS, ANTHONY G

FEOD SOUTH DIXIE HWY

LEIDESDORF, NICOLE EXC DIR
FEOD SOUTH DIXIE HWY

WEST PALM BEACH, FL 33405 US WEST PALM BEACH, FL 33405 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: NICOLE LEIDESDORF 08/20/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BP () Delete Title: () Change () Addition

 Name:
 BUTLER, KERENSA
 Name:

 Address:
 7600 SOUTH DIXIE HWY
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33405
 City-St-Zip:

Title: ED () Delete Title: ED (X) Change () Addition

 Name:
 PLAKAS, ANTHONY
 Name:
 LEIDESDORF, NICOLE

 Address:
 7600 SOUTH DIXIE HWY
 Address:
 7600 SOUTH DIXIE HWY

City-St-Zip: WEST PALM BEACH, FL 33405 US City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: VP () Delete Title: () Change () Addition

 Name:
 GRATTENDICK, MICHAEL
 Name:

 Address:
 5700 DESCARTES CIRCLE
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33433
 City-St-Zip:

Title: BS () Delete Title: () Change () Addition

 Name:
 WOODS, MICHAEL
 Name:

 Address:
 8130 A SEDGEWICK COURT
 Address:

 City-St-Zip:
 LAKE CLARKE SHORES, FL 33406
 City-St-Zip:

Title: TRES () Delete Title: BM (X) Change () Addition

Name: SMALL, STEPHANIE Name: GRAY, BAILEY

Address: 7600 SOUTH DIXIE HIGHWAY Address: 7600 SOUTH DIXIE HIGHWAY
City-St-Zip: WEST PALM BEACH, FL 33405
City-St-Zip: WEST PALM BEACH, FL 33405

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: KERENSA BUTLER BP 08/20/2006