

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126800

FILED
Jun 30, 2005
Secretary of State

Entity Name: THE COMPOUND CORPORATION

Current Principal Place of Business:

3902 CENTRAL SARASOTA PKWY
SARASOTA, FL 34238 US

New Principal Place of Business:

Current Mailing Address:

3902 CENTRAL SARASOTA PKWY
SARASOTA, FL 34238 US

New Mailing Address:

FEI Number: 32-0045316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA AGENT SERVICES, INC.
92 SADBERRY ROAD
QUINCY, FL 323510000 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: CLIPPARD, MATTHEW
Address: 3724 HELENE STREET
City-St-Zip: SARASOTA, FL 34233

Title: O () Delete
Name: SHIELDS, JACOB
Address: 3724 HELENE STREET
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: CLIPPARD, MATTHEW
Address: 514 BAYVIEW PARKWAY
City-St-Zip: NOKOMIS, FL 34275

Title: O (X) Change () Addition
Name: SHIELDS, JACOB
Address: 3760 HELENE STREET
City-St-Zip: SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW CLIPPARD

MR.

06/30/2005

Electronic Signature of Signing Officer or Director

_____ Date