

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106440

Entity Name: COMPSULT INC.

FILED
Aug 31, 2009
Secretary of State

Current Principal Place of Business:

4408 OLLIE ROAD
LAKELAND, FL 33810

New Principal Place of Business:

Current Mailing Address:

4408 OLLIE ROAD
LAKELAND, FL 33810

New Mailing Address:

FEI Number: 52-2279042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCARDELLA, DAWN
4408 OLLIE ROAD
LAKELAND, FL 33810 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCARDELLA, DAWN E
Address: 4408 OLLIE ROAD
City-St-Zip: LAKELAND, FL 33810

Title: VP () Delete
Name: SCARDELLA, DAVID
Address: 4408 OLLIE ROAD
City-St-Zip: LAKELAND, FL 33810

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCARDELLA, DAWN E
Address: 4408 OLLIE ROAD
City-St-Zip: LAKELAND, FL 33810 US

Title: VP (X) Change () Addition
Name: SCARDELLA, DAVID
Address: 4408 OLLIE ROAD
City-St-Zip: LAKELAND, FL 33810 US

Title: VP () Change (X) Addition
Name: AHLHEM, KEITH B
Address: WILD ACRES DEVELOPMET RR1, BOX 538
City-St-Zip: DINGMANS FERRY, PA 18328 US

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAWN E SCARDELLA

P

08/31/2009

Electronic Signature of Signing Officer or Director

Date