

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000128523

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: COMPASS ROADS REALTY, INC.

## Current Principal Place of Business:

2225 N. COMMERCE PKWY  
SUITE 2  
WESTON, FL 33326

## New Principal Place of Business:

6157 NW 167 STREET  
F28  
MIAMI, FL 33015

## Current Mailing Address:

2225 N. COMMERCE PKWY  
SUITE 2  
WESTON, FL 33326

## New Mailing Address:

6157 NW 167 STREET  
F28  
MIAMI, FL 33015

FEI Number: 26-1513112

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

## Name and Address of New Registered Agent:

SCHLEGEL, KAREN  
5249 SW 123 AVENUE  
COOPER CITY, FL 33330 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: KAREN SCHLEGEL

03/09/2009

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: PD ( ) Delete  
Name: HUMPHRIES, LISA  
Address: 16489 S.W. 2ND DRIVE  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VD ( ) Delete  
Name: SCHLEGEL, KAREN  
Address: 5249 S.W. 123 AVENUE  
City-St-Zip: COOPER CITY, FL 33330

Title: S ( ) Delete  
Name: HUMPHRIES, ALEXANDRA  
Address: 16489 S.W. 2ND DRIVE  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: T ( ) Delete  
Name: HUMPHRIES, TYLER  
Address: 16489 S.W. 2ND DRIVE  
City-St-Zip: PEMBROKE PINES, FL 33027

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KAREN SCHLEGEL

VP

03/09/2009

Electronic Signature of Signing Officer or Director

Date