

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000015857

Entity Name: COMPASS2LIFE INC.

FILED
Feb 28, 2009
Secretary of State

Current Principal Place of Business:

2025 LAVERS CIRCLE
D# 208
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

4960 NW 2ND COURT
BOCA RATON, FL 33431 US

Current Mailing Address:

2025 LAVERS CIRCLE
D# 208
DELRAY BEACH, FL 33444 US

New Mailing Address:

4960 NW 2ND COURT
BOCA RATON, FL 33431 US

FEI Number: 35-2329875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPENCER, SUZANNE E
2025 LAVERS CIRCLE
D # 208
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

SPENCER, SUZANNE E
4960 NW 2ND COURT
BOCA RATON, FL 33431 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: SUZANNE SPENCER

02/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SPENCER, SUZANNE E
Address: 2025 LAVERS CIRCLE D# 208
City-St-Zip: DELRAY BEACH, FL 33444 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SPENCER, SUZANNE E
Address: 4960 NW 2ND COURT
City-St-Zip: BOCA RATON, FL 33431 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: SUZANNE SPENCER

PR

02/28/2009

Electronic Signature of Signing Officer or Director

Date