

05-04-2005 90231 001 *1,200.00
P15167

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

05 MAY 25 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

66015292



01272005 No Chg-P CR2E034 (10/03)

DOCUMENT # P15167

1. Entity Name
COMPASS FIDUCIARY SERVICES LTD., INC.



Principal Place of Business
701 S. 32ND ST
BIRMINGHAM, AL 35233 US

Mailing Address
P.O. BOX 10566
ACCTG. DIV
BIRMINGHAM, AL 35296

DO NOT WRITE IN THIS SPACE

4. FEI Number
63-0959198

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agents signatures required when renewing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	POWELL, JERRY W.
STREET ADDRESS	15 S. 20TH ST
CITY- ST- ZIP	BIRMINGHAM, AL
TITLE	T
NAME	HEGEL, GARRETT R.
STREET ADDRESS	15 S. 20TH ST
CITY- ST- ZIP	BIRMINGHAM, AL
TITLE	CAO
NAME	PRESSLEY, KIRK
STREET ADDRESS	15 S 20TH ST
CITY- ST- ZIP	BIRMINGHAM, AL 35233
TITLE	P
NAME	FERGUSON, STEVENSON D
STREET ADDRESS	15 S 20TH ST
CITY- ST- ZIP	BIRMINGHAM, AL 35233
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE

[Handwritten signature]

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kirk Pressley 7/27/05 (205) 247-5724

Date

Daytime Phone #