

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2006 8:00 am**  
**Secretary of State**

05-03-2006 90453 001 \*1,200.00

**DOCUMENT # P30811**

1. Entity Name  
COMPASS SECURITIES, INC.



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

Mailing Address  
P.O. BOX 10566 ACCOUNTING DIVISION  
BIRMINGHAM, AL 35296

**66014092**



04202006 No Chg-P CR2E034 (11/05)

4. FEI Number  
63-1031139

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

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

**DO NOT WRITE  
IN THIS SPACE**

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 Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	SVCD
NAME	POWELL, JERRY
STREET ADDRESS	15 SOUTH 20TH ST.
CITY-ST-ZIP	BIRMINGHAM, AL
TITLE	TD
NAME	HEGEL, GARRETT R
STREET ADDRESS	15 SOUTH 20TH ST.
CITY-ST-ZIP	BIRMINGHAM, AL
TITLE	CAO
NAME	PRESSLEY, KIRK
STREET ADDRESS	15 SOUTH 20TH STREET
CITY-ST-ZIP	BIRMINGHAM, AL
TITLE	P
NAME	GRANT, MITCH
STREET ADDRESS	15 SOUTH 20TH STREET
CITY-ST-ZIP	BIRMINGHAM, AL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

5/1/06  
Date

Daytime Phone #