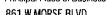
2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P94000024176 COMPASS HOMES, INC. Principal Place of Business Mailing Address

FILED Mar 15, 2007 08:00 AM Secretary of State



861 W MORSE BLVD SUITE 250 WINTER PARK, FL 32789

SIGNATURE:

PO BOX 940658

MAITLAND, FL 32794-0638



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

No Chg-P 01032007 CR2E034 (11/05) 4. FEI Number Applied For 59-3239509 Not Applicable

\$8.75 Additional 5. Certificate of Status Desired

Fee Required

BROWN, DON L 200 NORTH THORNTON AVENUE

DO NOT WRITE

ORLANDO, FL 32801			IN THIS SPACE			
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or a	egistered agent, or bot	h, in the Stale of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	applicable. (NOTE: Registered	Agent signatur	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.		9 \$5.00 May Be		
10.	OFFICERS AND DIREC	CTORS				
NAME STREET ADDRESS CITY-ST-ZIP	PD GREENE, SHELDON 861 W MORSE BLVD WINTER PARK, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ANGLIN, HELEN 861 W MORSE BLVD WINTER PARK, FL				U00000666870 03/26/07-80005-021 150.0	0
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
12. I hereby of indicated of the cor changed,	certify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ling does not qualify for the exe and accurate and that my signate to execute this report as require other like empowered.	mptions cor ure shall haved ad by Chap	ntained in Chapter 119, re the same legal effect er 607, Florida Statutes	Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director; and that my name appears in Block 10 or Block 11 if	

REDON - SHELDON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR