

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000083360

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** COMPASS ROSE INVESTIGATIONS, INC.

**Current Principal Place of Business:**

17580 ORANGE GROVE BLVD  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 1136  
LOXAHATCHEE, FL 33470 11

**New Mailing Address:**

**FEI Number:** 65-0707387      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AKEY, TED  
17580 ORANGE GROVE BLVD  
LOXAHATCHEE, FL 33470 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

**Title:** VPSD  
**Name:** AKEY, CHERYL  
**Address:** 17580 ORANGE GROVE BLVD  
**City-St-Zip:** LOXAHATCHEE, FL 33470

**Title:** PTD  
**Name:** AKEY, TED  
**Address:** POST OFFICE BOX 1136  
**City-St-Zip:** LOXAHATCHEE, FL 33470

I hereby 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 all other like empowered.

SIGNATURE: TED AKEY

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PTD

01/03/2012

\_\_\_\_\_ Date