## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000099550

City-St-Zip:

Entity Name: COMPLIANCE CONSULTING CORPORATION OF FLORIDA

FILED Mar 28, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1013 LUCE 201	RNE AVE					
	RTH, FL 33460	US				
Current Mailing Address:			New Mailir	New Mailing Address:		
1013 LUCERNE AVE 201				1013 LUCERNE AVE 201		
LAKE WORTH, FL 33460				LAKE WORTH, FL 33460 US		
FEI Number:	65-0796037	FEI Number Applied For ( )	FEI Number Not Appli	icable ( ) C	ertificate of Status Desired ( )	
Name and Address of Current Registered Agent: Nam				ame and Address of New Registered Agent:		
LOVELL, ILSE 1013 LUCERNE AVE #201 LAKE WORTH, FL 33460 US			1013 LUCE	LOVELL, RONALD 1013 LUCERNE AVE #201 LAKE WORTH, FL 33460 US		
The above in the State		bmits this statement for the pu	rpose of changing it	s registered offic	e or registered agent, or both,	
SIGNATURE: RONALD LOVELL				03/28/2006		
	Electronic	Signature of Registered Agen	t		Date	
Election Cam	paign Financing 1	Frust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S () D LOVELL, ILSE 1013 LUCERNE A LAKE WORTH, FI		Title: Name: Address: City-St-Zip:	( ) Cł	nange ( ) Addition	
Title: Name: Address: City-St-Zip:	P () C LOVELL, RONALI 1013 LUCERNE A LAKE WORTH, F	NVE #201	Title: Name: Address: City-St-Zip:	P (X) CH LOVELL, RONALD 1013 LUCERNE AV LAKE WORTH, FL	VE #201	
Title: Name: Address: City-St-Zip:	VP () D MARTIN, JAN 1013 LUCERNE A LAKE WORTH, FI		Title: Name: Address: City-St-Zip:	V/P (X) CH MARTIN, JAN 1013 LUCERNE AV LAKE WORTH, FL		
Title: Name: Address:	( ) [	elete	Title: Name: Address:	V/P () Ch LOVELL, CHRISTO 1013 LUCERNE A		

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

City-St-Zip:

SIGNATURE: RONALD L. LOVELL P 03/28/2006

LAKE WORTH, FL 33460 US