

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000462

Entity Name: COMPASS GROUP USA, INC.**Current Principal Place of Business:**2400 YORKMONT RD
TAX DEPT.
CHARLOTTE, NC 28217**Current Mailing Address:**C/O TAX DEPT.
2400 YORKMONT RD.
CHARLOTTE, NC 28217 US**FEI Number: 56-1874931****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title	DIRECTOR, CFO	Title	DIRECTOR, EXE VP, SECRETARY
Name	MEREDITH, ADRIAN L	Name	BROWN, C PALMER
Address	2400 YORKMONT ROAD	Address	2400 YORKMONT ROAD
City-State-Zip:	CHARLOTTE NC 28217	City-State-Zip:	CHARLOTTE NC 28217
Title	TREASURER	Title	ASST. SECRETARY
Name	ZAUF, GARY Z	Name	ROSSITCH, RICHARD J
Address	2400 YORKMONT RD	Address	2400 YORKMONT ROAD
City-State-Zip:	CHARLOTTE NC 28217	City-State-Zip:	CHARLOTTE NC 28217
Title	ASST. SECRETARY	Title	ASST. SECRETARY
Name	DELANO, DEBORAH	Name	BRIOTTE, KRISTIN
Address	2400 YORKMONT ROAD	Address	2400 YORKMONT RD.
City-State-Zip:	CHARLOTTE NC 28217	City-State-Zip:	CHARLOTTE NC 28217
Title	ASST. SECRETARY		
Name	JONES, LAURENCE		
Address	2400 YORKMONT RD.		
City-State-Zip:	CHARLOTTE NC 28217		

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: C PALMER BROWN**EXE VP, SECRETARY****04/24/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date