

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009932

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** SYNERGY OUTDOOR ADVENTURE RESOURCES, INC.

**Current Principal Place of Business:**

2040 POLK STREET  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

2040 POLK STREET  
HOLLYWOOD, FL 33020

**New Mailing Address:**

**FEI Number:** 27-1620723

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURPHY, WILL  
2040 POLK STREET  
HOLLYWOOD, FL 33020 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: PCEO  
Name: MURPHY, WILL  
Address: 2040 POLK STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD  
Name: MURPHY, WILL  
Address: 2040 POLK STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D  
Name: MURPHY, WILLIAM F  
Address: 152 NE 167TH STREET #300  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: SD  
Name: DEFFLER, KRISTIN  
Address: 2040 POLK STREET  
City-St-Zip: HOLLYWOOD, FL 33020

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILL MURPHY AS PCEO

PCEO

01/07/2010

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

\_\_\_\_\_  
Date