

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 231180

Entity Name: SYNCROLIFT, INC.

FILED
May 07, 2009
Secretary of State

Current Principal Place of Business:

110 NORFOLK ST
WALPOLE, MA 02081

New Principal Place of Business:

Current Mailing Address:

14850 CONFERENCE CENTER DR
SUITE 100
CHANTILLY, VA 20151 US

New Mailing Address:

1875 EXPLORER ST.
SUITE 200
RESTON, VA 20190 US

FEI Number: 59-0878881

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GUYETTE, JAMES M
Address: 14850 CONFERENCE CENTER DR
City-St-Zip: CHANTILLY, VA 20151

Title: S () Delete
Name: SULLIVAN, MARY S
Address: 14850 CONFERENCE CENTER DR
City-St-Zip: CHANTILLY, VA 20151

Title: P () Delete
Name: MARSH, ANDREW
Address: 110 NORFOLK ST
City-St-Zip: WALPOLE, MA 02081

Title: V () Delete
Name: HURST, KENNETH
Address: 2 DATRAN CTR., SUITE 102
City-St-Zip: MIAMI FLA, 33156

Title: VP () Delete
Name: D'APRILE, PIER
Address: 110 NORFOLK ST
City-St-Zip: WALPOLE, MA 02081

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GUYETTE, JAMES M
Address: 1875 EXPLORER ST., SUITE 200
City-St-Zip: RESTON, VA 20190

Title: S (X) Change () Addition
Name: SULLIVAN, MARY S
Address: 1875 EXPLORER ST., SUITE 200
City-St-Zip: RESTON, VA 20190

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: HURST, KENNETH
Address: 110 NORFOLK ST.
City-St-Zip: WALPOLE, MA 02081

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: MARY S. SULLIVAN

SEC

05/07/2009

Electronic Signature of Signing Officer or Director

Date