Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90191 027 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCIJMENT # 380461

SYNTHESIS CORPORATION

Principal P ace of Business Mailing Address							186 1448) 18111 88111 61616	WILLIAM 1201 1820 17 911	#11 #H#() (H (1	# \$1 # 1 # 1 P 1 P 1 P 1
2059 BEACH WOOD VILLAS		2059 BEACH WOOD VILL	2059 BEACH WOOD VILLAS								
AMELIA ISLANDS PLANTATION		AMELIA ISLANDS PLANTATION			DO NOT WRITE IN THIS SPACE						
FERNANDINA F	L 32034-6102	FERNANDINA FL 32034-6102			3. Date Incorporated or Qualifed						
						04/15/	- · F	, ,			
2 Principal P	lace of Business	2a, Mailing Address			··· · · · · · · · ·	4. FEI Num		_	$\neg \tau$	Apr	lied For
21		26			59-134	8929		Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				e of Status Desired		\$8.	75 A	ditional	
22					5. Centicat	e or Status Desired		Fe	e Red	uired	
City & State		City & State			6. Election	Campaign Financin	g 🗆	-		Лау Ве	
23		28			Trust Fund Contribution Added to Fees						
Zip	Couritry	Zip	Zip Country			8. This corporation owes the current year Intangible Person at Property Tax Person at Property Tax					
24	25	29	30				Property Tax.	Bosistors d	Yes		<u></u>
	9. Name and Address of Curre	nt Registered Agent		81	Name	10, Name a	na Address of Nev	w registere u	Agent		
RHO	DES. ROBERT M.										
	BEACH WOOD VILLAS			82	Street Ad	dress (P.O. Bo) N	Number is Not Acce	ptable)			
	NANDINA FL 32034			83							
1 6.1 10	, W. () D. () D. ()										
				84	City			FL	85	Zip C	ode
dd Dumus nt	to the provisions of Sections 607.050	00 and 607 1508. Florida Stati	tes the a	hove	e-named co	rnoration submi s	this statement for t	he nurnose of	changir	g its	egistered
office (it t	registered agent, or both, in the State im familiar with, and accept the obligation.	erf Florida. Such change was	authorized	' עם ני	the corpora	ition's board of dir	ectors. I hereby ac	cept the apt or	ntment	as reg	stered
SIGNATUF E	Signature, typed or printed name of registered age	ent and title d applicable. (NO	TE: Registered	. Agen	t signature requi	ired when reinstating)		STAC			·—
12.		NE) DIRECTORS	13.			ADDITIO	NS/CHANGES TO	OFFICERS AN	ID DIRE	СТО	
TITLE	PD	☐ DELETE	1.1 Tf	TLE					☐ Cha	inge	☐ Addition
NAME	RHODES,R.M.		1.2 N	1.2 NAME							
STREET ADDRESS	2059 BEACH WOOD VILLAS			TREET	ADDRESS						
CITY-ST-ZIP	FERNANDINA BEACH FL	RNANDINA BEACH FL 14		ITY-\$1	r-ZIP				C 01.		
TITLE	S	☐ DELETE	2.1 TI	TLE					☐ Cha	inge	☐ Addition
NAME	RHODES,R.L.		2.2 NAM								
STREET ADDRESS				TREET	ADDRESS						
CITY-ST-ZIP	FERNANDINA BEACH FL			XTY-5	T-ZIP				Cha	2000	Addition
TITLE		☐ DELETE	3.1 TI						□ cus	ırıye	
NAME			3.2 N								
STREET ADDRE 3S					ADDRESS						
CITY-ST-ZIP		□ DELETE		ITY-S	T-ZIP				∏ Ch:	ange	Addition
TITLE			4.1 TI						٠	90	(
NAME				IAME	1000500						
STREET ADDRE 3S				IKEE	ADDRESS						
CITY-ST-ZIP		☐ DELETE		_							
TITLE				ITY-S	1-219				□ Ch:	ange	Addition
NAME				TLE	1-219				☐ Cha	ange	Addition
			5.2 N	TLE					☐ Cha	ange	Addition
STREET ADDRESS			5.2 N 5.3 S	TLE AME TREET	T ADDRESS				☐ Cha	ange	Addition
STREET ADDRESS CITY-ST-ZIP TITLE		[] DELETE	5.2 N 5.3 S	TLE AME TREET	T ADDRESS				□ Ch	_	☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under coath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as recuired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADORE 3S