


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90839 024 ***150.00

DOCUMENT # F0000006613

1. Entity Name
SYNERGENCE GROUP, INC.



Principal Place of Business Mailing Address
200 N. LASALLE STREET, SUITE 400 **200 N. LASALLE STREET, SUITE 400**
CHICAGO, IL 60601 **CHICAGO, IL 60601**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SCHUMAN, SUSAN J 200 N. LASALLE STREET, SUITE 400 CHICAGO, IL 60601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV COHEN, JUDITH 200 N. LASALLE STREET, SUITE 400 CHICAGO, IL 60601	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DESMOND COUSINO, DARRAH 200 N. LASALLE STREET, SUITE 400 CHICAGO, IL 60601	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FRIDAY, DENISE S 200 N. LASALLE STREET, SUITE 400 CHICAGO, IL 60601	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV SCHNUR, MARY T 200 N LASALLE ST STE 400 CHICAGO, IL 60601	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV HUDSON, BEVERLY G 200 N. LASALLE STREET, SUITE 400 CHICAGO, IL 60601	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Burke, John Christopher 200 N. LaSalle St., Suite 400 Chicago, IL 60601	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV McHugh, Mary A. 200 N. LaSalle St., Suite 400 Chicago, IL 60601	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC Musacchio, Robert A. PhD 515 N. State St., Chicago, IL 60610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hagerty, Denise M. 515 N. State Street Chicago, IL 60610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hengesbaugh, Bernard L. 515 N. State Street, Chicago, IL 60610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. Christopher Burke 4-27-2007 312-419-5077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

900000-



04202007 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
36-4399129 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

ATTACHMENT
Synergence Group, Inc.
200 No. LaSalle Street, Suite 400
Chicago, Illinois 60601

40093103
#F00000006613

List of Officers and Directors
NAMES IN BOLD BELONG IN FLORIDA DATABASE

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
J. Christopher Burke	PD President, Vice Chairman of the Board and Director	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Judith Cohen	Assistant Vice President	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Darrah Desmond Cousino	Assistant Vice President	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Jon N. Ekdahl	Director	515 North State Street Chicago, IL 60610
Gary C. Epstein	Director	515 North State Street Chicago, IL 60610
Denise S. Friday	Vice President	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Denise M. Hagerty	D Director	515 North State Street Chicago, IL 60610
J. Michael Hegwood	Assistant Vice President	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Bernard L. Hengesbaugh	D Director	515 North State Street Chicago, IL 60610
Beverly G. Hudson	Assistant Vice President	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Mary A. McHugh	TV Vice President and Treasurer	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Robert A. Musacchio, PhD	D Chairman of the Board and Director	515 North State Street Chicago, IL 60610
Mary T. Schnur	Assistant Vice President	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Susan J. Schuman	SV Vice President and Secretary	200 North LaSalle Street, Suite 400 Chicago, IL 60601
Cynthia K. Warden	Assistant Vice President	200 North LaSalle Street, Suite 400 Chicago, IL 60601