## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000000181

Entity Name: SYNERGETIC DESIGN, INC.

FILED Apr 14, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3440 LAKEMONT BLVD. FORT MILL, SC 29708 **Current Mailing Address: New Mailing Address:** P.O.BOX 7809 CHARLOTTE, NC 28241 FEI Number: 36-4504461 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SUTTON, MICHAEL G SUTTON, MICHAEL G 13621 NORTH FLORIDA AVE. 21754 SR 54 TAMPA, FL 33613 SUITE 101 LUTZ, FL 33549 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: 04/14/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: COB () Delete Title: () Change () Addition ARNOULT, TIM Name: Name: 100 N TRYON ST Address: Address: CHARLOTTE, NC 28202 City-St-Zip: City-St-Zip: **PCEO** Title: Title: () Delete (X) Change ( ) Addition Name: WILLIAMS, DAVID C Name: KISTNER, MICHAEL C 3440 LAKEMONT BLVD. 3440 LAKEMONT BLVD. Address: Address: FT. MILL, SC 29708 FT. MILL, SC 29708 City-St-Zip: Citv-St-Zip: Title: BMD ( ) Delete Title: () Change () Addition OKEN, MARC D Name: Name: 100 N TRYON ST Address: Address: City-St-Zip: CHARLOTTE, NC 28202 City-St-Zip: Title: CRO () Delete Title: CAO (X) Change ( ) Addition TALLEY, MIKE TALLEY, MICHAEL H Name: Name: Address: 3440 LAKEMONT BLVD Address: 3440 LAKEMONT BLVD City-St-Zip: FORT MILL, SC 297089243 City-St-Zip: FORT MILL, SC 297089243 Title: Title: ( ) Change (X) Addition () Delete Name: Name: MCMAHAN, ED Address: Address: 100 N TRYON ST

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.

City-St-Zip:

CHARLOTTE, NC 28202

SIGNATURE: MICHAEL H. TALLEY CAO 04/14/2009

City-St-Zip: