## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## **Secretary of State** 03-22-2007 90014 005 \*\*\*150.00 DOCUMENT # F98000004269 SYNOVUS FINANCIAL CORP. 60027422 Principal Place of Business . . Mailing Address 1111 BAY AVENUE P.O. BOX 120 SUITE 500 SANGE FOR STORY COLUMBUS, GA 31901 COLUMBUS, GA 31902 2. Principal Place of Business - No.P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 03162007 Chg-P Applied For 4. FEI Number City & State City & State Not Applicable 58-1134883 Zio Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code City 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete Addition TITLE TITLE BLANCHARD, JAMES H NAME NAME 1111 BAY AVENUE, SUITE 500 STREET ADDRESS STREET ADDRESS COLUMBUS, GA 31901 CITY-ST-ZIP CITY-ST-ZIP Chairman of the Board Change Richard & Anthony ☐ Addition PD TITLE CO THTLE Delete ANTHONY, RICHARD E NAME NAME III Bay Avenue, Suite 500 STREET ADDRESS 1111 BAY AVENUE, SUIYE 500 STREET ADDRESS COLUMBUS, GA 31901 COlumbus GA 31901 CITY-ST-7/P CITY-ST-7P Change Addition ☐ Delete TITL F TITLE PRESCOTT, THOMAS J NAME NAME 1111 BAY AVENUE, SUITE 500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COLUMBUS, GA 31901 CITY-ST-ZIP ■ Addition ☐ Change SEVS TITLE TITLE ☐ Delete GRIFFITH, G. SANDERS III NAME NAME STREET ADDRESS STREET ADDRESS 1111 BAY AVENUE, SUITE 500 COLUMBUS, GA 31901 CITY-ST-ZIP CITY-ST-ZIP TITLE PD President + COO Change ☐ Addition TITLE DVC ☐ Delete GREEN, FRED L III Fred L Green !!! NAME NAME IIII Bay Avenue, Suite 500 STREET ADDRESS STREET ADDRESS 1111 BAY AVENUE, SUITE 500\ CITY-ST-ZIP COLUMBUS, GA 31901 CITY-ST-ZIP GA ☐ Change ■ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

Jennifer S Hines 3.110.07

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