

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K32161

1. Entity Name

SYNERGY SYSTEMS, INC.

FILED
Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90014 030 ***150.00

Principal Place of Business

% ALAN ARNOLD
5364 DOMINICA CIRCLE
SARASOTA FL 34233

Mailing Address

% ALAN ARNOLD
5364 DOMINICA CIRCLE
SARASOTA FL 34233

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0079014

Applied For
Not Applicable

5. Certificate of Status Desired ☐ -

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARNOLD, ALAN
5364 DOMINICA CIRCLE
SARASOTA FL 34233

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PT ☐ Delete
NAME ARNOLD, ALAN
STREET ADDRESS 5364 DOMINICA CIRCLE
CITY-ST-ZIP SARASOTA FL

TITLE V ☐ Delete
NAME ARNOLD, NANCY
STREET ADDRESS 5364 DOMINICA CIR
CITY-ST-ZIP SARASOTA FL

TITLE T ☐ Delete
NAME ROMAINE, CURTIS
STREET ADDRESS 3543 TREE LINE COURT
CITY-ST-ZIP SARASOTA FL

TITLE S ☐ Delete
NAME ROMAINE, LAVERNE S.
STREET ADDRESS 3543 TREE LINE COURT
CITY-ST-ZIP SARASOTA FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

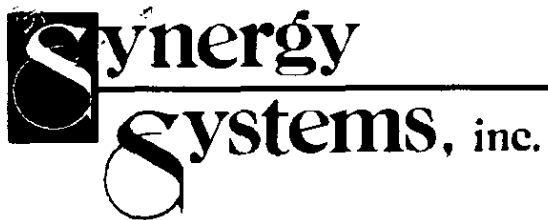
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-00 941-378-1820

Date

Daytime Phone #

CR2E034 (5/00)



1/32/6/ (Attachment)

ADW68493

Division of Corporations.
P.O. Box 6327
Tallahassee FL 32314

July 11, 2000

To whom it may concern:

I spoke to Ruth in your office today regarding the UBR for Synergy Systems. She advised me to send in our check for \$150.00 and attach this letter to the report. We have no record of receiving the first notice of the URB report.

The absence of this report and payment was not intentional on our part and we have never missed our obligation in the past. As Ruth suggested we will place the URB date on our calendar and take action if we do not receive notification in the future.

Thank you for your attention to this situation.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Alan Arnold', is written over the word 'Sincerely,'.

Alan Arnold