

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 25, 2006 8:00 am**  
**Secretary of State**

04-26-2006 90026 037 \*\*\*\*50.00

<b>DOCUMENT # L05000069126</b> 1. Entity Name <b>SYNERGY SPORTS, LLC</b>					
Principal Place of Business <b>6300 TAYLOR ROAD NAPLES, FL 34109</b>			Mailing Address <b>6300 TAYLOR ROAD NAPLES, FL 34109</b>		
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 <b>20-3146401</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>SIKET, SOLIS &amp; MAHER, P.L. 1100 5TH AVENUE SOUTH SUITE 301 NAPLES, FL 34102</b>				Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ (NOTE: Registered Agent signature required when releasing) _____ DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		Make check payable to <b>Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MANAGING MEMBER</b> <b>Walter K. Swiderski</b> <b>12760 Chardon Court</b> <b>Fort Myers, FL 33912</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>W. Kurt Swiderski</u> <u>W. Kurt Swiderski</u> <u>4/24/06</u> <u>239-593-9374</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

**SWOPE**

**LAMBERSON**

**& CHARBONNEAU, P.A.**

*Certified Public Accountants*

ATTACHMENT

30008932

# L05000069126

*Memorandum*

To: Division of Corporations

From: Elizabeth Alpert, CPA

Date: May 23, 2006

Attached please find the annual report that we are re-submitting. Our client's original annual report was filed prior to May 1, 2006, however, it was returned to them by your office along with the enclosed letter. We have now made the requested changes and the updated annual report is enclosed. If you have any questions, please feel free to contact me at the Naples office.