

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000060055

**FILED**  
**Mar 23, 2007**  
**Secretary of State**

**Entity Name:** SYNERGY DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

13509 PRINCESS KELLY DR.  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

13509 PRINCESS KELLY DR.  
JACKSONVILLE, FL 32225

**New Mailing Address:**

**FEI Number:** 06-1788907

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILLSAPS, WALTER S ESQ.  
2602 ISABELLA BLVD., SUITE 50  
JACKSONVILLE BEACH, FL 32250 US

**Name and Address of New Registered Agent:**

WILLIAM, ALSON  
13509 PRINCESS KELLY DR  
JACKSONVILLE, FL 32225 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: WILLIAM ALSON

03/23/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ALSON, WILLIAM B  
Address: 13509 PRINCESS KELLY DR.  
City-St-Zip: JACKSONVILLE, FL 32225

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WILLIAM ALSON

MGR

03/23/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date