

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000109090

FILED
Jun 02, 2008
Secretary of State

Entity Name: THE SYNERGIST GROUP, LLC

Current Principal Place of Business:

5026 TIDEVIEW CIRCLE
13
ORLANDO, FL 32819

Current Mailing Address:

P.O. BOX 690644
ORLANDO, FL 32869

New Principal Place of Business:

4224 ANSON LANE
07-104
ORLANDO, FL 32814

New Mailing Address:

3867 GLIDING PLACE
SANFORD, FL 32773

FEI Number: 26-1310579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

OWENS, GARY L JR
754 HADDONSTONE CIRCLE
200
HEATHROW, FL 32746 US

Name and Address of New Registered Agent:

OWENS, GARY L JR
3867 GLIDING PLACE
SANFORD, FL 32773 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: GARY L. OWENS, JR.

06/02/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OWENS, GARY L JR
Address: 754 HADDONSTONE CIRCLE, #200
City-St-Zip: HEATHROW, FL 32746

Title: MGRM () Delete
Name: EDWARDS, ROGER C JR
Address: P.O. BOX 690644
City-St-Zip: ORLANDO, FL 32869

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OWENS, GARY L JR
Address: 3867 GLIDING PLACE
City-St-Zip: SANFORD, FL 32773

Title: MGRM (X) Change () Addition
Name: EDWARDS, ROGER C JR
Address: 4224 ANSON LANE APT 07-104
City-St-Zip: ORLANDO, FL 32814

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 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: GARY L. OWENS, JR.

MGRM

06/02/2008

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