

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000013057

**Entity Name:** SYNTERGY FINANCIAL, LLC

**FILED**  
**Feb 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

388 WELLS AVE  
FELT, ID 83424

**New Principal Place of Business:**

2110 MORNING SUN LANE  
NAPLES, FL 34119

**Current Mailing Address:**

P.O. BOX 67  
TETONIA, ID 83452

**New Mailing Address:**

15275 COLLIER BLVD #319  
NAPLES, FL 34119

**FEI Number:** 26-4262509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARNOLD, LACY  
2110 MORNING SUN LANE  
NAPLES, FL 34119 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ARNOLD, BRUCE  
Address: 388 WELLS AVE  
City-St-Zip: FELT, ID 83424

I hereby 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: BRUCE ARNOLD

MGRM

02/03/2010

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