


**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 06, 2007 08:00 A**  
**Secretary of State**

|  |   |
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| <b>DOCUMENT # N03000006752</b><br>1. Entity Name<br>FRIENDS OF SYNCHRO, INC. |  |
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| Principal Place of Business<br>4116 GRANDCHAMP CIRCLE<br>PALM HARBOR, FL 34685 | Mailing Address<br>4116 GRANDCHAMP CIRCLE<br>PALM HARBOR, FL 34685 |
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**DO NOT WRITE IN THIS SPACE**



03292007 No Chg-NP CR2E037 (4/06)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br><b>32-0088989</b>                        | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

**6. Name and Address of Current Registered Agent**

ZOHN, JODY B  
284 KATHERINE BLVD., #8201  
PALM HARBOR, FL 34684

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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 reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000694234  
04/17/07-80009-015 61.25

| 10. OFFICERS AND DIRECTORS                     |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>LANDIS, JODY B<br>4116 GRANDCHAMP CIRCLE<br>PALM HARBOR, FL 34685 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>PATTERSON, JEAN<br>10749 126 AVE NORTH<br>LARGO, FL 33778         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>O'CONNELL, JAYNE<br>3118 BLUE HERON ST<br>SAFETY HARBOR, FL 34696 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>COOKE, DAVID<br>105 HARBOR WOODS CIR<br>SAFETY HARBOR, FL 34695   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

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12. 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Jayne O'Connell 4-3-2007 727-712-9327  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone