2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006
Secretary of State

DOCUMENT# N03000009638

Entity Name: SYNERGY EDUCATION ASSOCIATES, INC.

Current Principal Place of Business:

83373 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Principal Place of Business:

83373 OLD HWY
ISLAMORADA, FL 33036

Current Mailing Address:

83373 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Mailing Address:

83373 OLD HWY
ISLAMORADA, FL 33036

FEI Number: 20-0426964 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MULICK, NICHOLAS W ESQ
91645 OVERSEAS HIGHWAY
TAVERNIER, FL 33070 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MAKEPEACE, A. DAVID
Address: 83311 OLD HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

Title: ST ( ) Delete
Name: MAKEPEACE, LINDA
Address: 83311 OLD HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

Title: VP ( ) Delete
Name: DIERSING, BRYANT
Address: 20 NORTH OCEAN DR.
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change ( ) Addition
Name: MAKEPEACE, LINDA S
Address: 83311 OLD HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA S. MAKEPEACE ST 01/12/2006

Electronic Signature of Signing Officer or Director — Date