

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005619

FILED
Feb 16, 2009
Secretary of State

Entity Name: SYNCURE, INC.

Current Principal Place of Business:

3216 SESSIONS RD STE 200
TALLAHASSEE, FL 32303

New Principal Place of Business:

3609 N. MERIDIAN ROAD
TALLAHASSEE, FL 32312

Current Mailing Address:

3216 SESSIONS RD STE 200
TALLAHASSEE, FL 32303

New Mailing Address:

P.O. BOX 180219
TALLAHASSEE, FL 32318

FEI Number: 31-1574909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLTON, ROBERT A
7125 UPLAND GLADE
TALLAHASSEE, FL 32312 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: PD () Delete
Name: HOLTON, ROBERT A
Address: 7125 UPLAND GLADE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VD () Delete
Name: KRAFFT, MARIE E
Address: 7125 UPLAND GLADE
City-St-Zip: TALLAHASSEE, FL 32312

Title: STD () Delete
Name: EPPERSON, MARIE C
Address: DEPT. OF CHEMISTRY FLA STATE UNIVERSITY
City-St-Zip: TALLAHASSEE, FL 32306

Title: D () Delete
Name: MATTHEW, SIDNEY L
Address: 135 SOUTH MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: METTS, LEWIS L
Address: 161 HIGHLAND AVENUE
City-St-Zip: RIDGEWOOD, NJ 07450

Title: ED () Delete
Name: DEVINE, MICHAEL D
Address: 3216 SESSIONS RD STE 200
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: MD (X) Change () Addition
Name: DEVINE, MICHAEL D
Address: 998 ROSEBAY CT
City-St-Zip: TALLAHASSEE, FL 32312

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 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: MARIE C. EPPERSON

STD

02/16/2009

Electronic Signature of Signing Officer or Director

Date