2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2011
Secretary of State

DOCUMENT# N97000005619

Entity Name: SYNCURE, INC.

Current Principal Place of Business:

3609 N. MERIDIAN ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 180219
TALLAHASSEE, FL 32318

New Mailing Address:

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

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

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

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

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

Title: MD
Name: DEVINE, MICHAEL D
Address: 998 ROSEBAY CT
City-St-Zip: TALLAHASSEE, FL 32312

I hereby 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 all other like empowered.

SIGNATURE: MARIE C. EPPERSON STD 02/24/2011
Electronic Signature of Signing Officer or Director Date