

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094318

Entity Name: SYNTHOL DIRECT, INC.

FILED
Apr 06, 2004
Secretary of State

Current Principal Place of Business:

629 JERRELLS AVE
FT WALTON BEACH, FL 32547

New Principal Place of Business:

1660 BENNETT'S END
FT WALTON BEACH, FL 32547

Current Mailing Address:

629 JERRELLS AVE
FT WALTON BEACH, FL 32547

New Mailing Address:

1660 BENNETT'S END
FT WALTON BEACH, FL 32547

FEI Number: 02-0563602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAVOY, JENNIFER L
629 JERRELLS AVE
FT WALTON BEACH, FL 32547

Name and Address of New Registered Agent:

NAVOY, JENNIFER L
1660 BENNETTS END
FT WALTON BEACH, FL 32547

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: JENNIFER L NAVOY

04/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NAVOY, JENNIFER L
Address: 629 JERRELLS AVE
City-St-Zip: FT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NAVOY, JENNIFER L
Address: 1660 BENNETTS END
City-St-Zip: FT WALTON BEACH, FL 32547

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER L NAVOY

DIR

04/06/2004

Electronic Signature of Signing Officer or Director

Date