2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000008790

FILED Apr 27, 2009 Secretary of State

Entity Name: SYNERGY CONTRACTORS, INC.			
Current Principal Place of Business:	New Principal Place o	New Principal Place of Business:	
3511 NORTH ROAD N FORT MYERS, FL 33917			
Current Mailing Address:	New Mailing Address	:	
PO BOX 152729 CAPE CORAL, FL 33915			
FEI Number: 90-0307194 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of	New Registered Agent:	
COMPUTIS, INC. 258 TAMPA AVE W. VENICE, FL 34285 US			
The above named entity submits this statement for the puin the State of Florida.	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Agen	t	Date	
Election Campaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS: ADDITIONS/CHANGE		S TO OFFICERS AND DIRECTORS	
Title: P () Delete	Title: P	(X) Change () Addition	

Title: P () Delete Title: P (X) Change () Addition
Name: NIEVES, NELSON JR Name: NIEVES, NELSON C
Address: 1379 DEAN CIR Address: 1379 DEAN CIR
City-St-Zip: N FT MYERS, FL 33917

Title: VP () Delete Title: () Change () Addition

 Title:
 VP
 () Delete
 Title:

 Name:
 NIEVES, VERNE
 Name:

 Address:
 1379 DEAN CIR
 Address:

 City-St-Zip:
 N FT MYERS, FL 33917
 City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NELSON C. NIEVES P 04/27/2009