## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000127275

Entity Name: SYNERGY RESOLUTIONS, INC.

FILED Apr 30, 2009 Secretary of State

1805 OAK STREET N VALRICO, FL 33594

Current Mailing Address: New Mailing Address:

1805 OAK STREET N VALRICO, FL 33594

FEI Number: 26-1572568 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:

ISAKSEN, JENNIFER ESQ TEWMEY, CONNIE
415 S MACDILL AVE
TAMPA, FL 33609 US TEWMEY, CONNIE
1805 OAK STREET NORTH
VALRICO, FL 33594 US

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: CONNIE TEWMEY 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 TEWMEY, CONNIE
 Name:
 TEWMEY, CONNIE

 Address:
 PO BOX 466
 Address:
 1805 OAK STREET NORTH

 Address:
 PO BOX 466
 Address:
 1805 OAK STREET NORTH

 City-St-Zip:
 VALRICO, FL 335950466
 City-St-Zip:
 VALRICO, FL 33594

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: TEWMEY, DANE TEWMEY, DANE

Address: PO BOX 466 Address: 1805 OAK STREET NORTH
City-St-Zip: VALRICO, FL 335950466 City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 TEWMEY, DÂNIELLE
 Name:
 TEWMEY, DÂNIELLE

 Address:
 PO BOX 466
 Address:
 1805 OAK STREET NORTH

 City-St-Zip:
 VALRICO, FL 335950466
 City-St-Zip:
 VALRICO, FL 33594

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: CONNIE TEWMEY D 04/30/2009