FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000057464 (8)

SYNERGY BUILDERS, INC.

| Principal Place of Business 2326 OAK DRIVE FORT PIERCE FL 34949 | | Mailing Address 2326 OAK DRIVE FORT PIERCE FL 34949-1546 | | | | |
|---|--|---|--|---------------------------------------|--|--|
| - | | | | | 3. Date Incorporated or Qualified 08/09/1993 | 3a. Date of Last |
| 2. Principal Place of Business 21 | | 2a. Mailing Address | 1 | | 4. FEI Number 65-0433199 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | _ ' . |
| City & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | s f |
| Zip. 24 | Country 25 | . | | ry | 7 10 1100 0 111111110 | Yes , No |
| | 9. Name and Address of Current | Registered Agent | | | 10. Name and Address of New Reg | istered Agent |
| ANK | EL, RAYMOND L | | 8 | 1 Name | | |
| 2326 | OAK DRIVE T PIERCE FL 34949 | | 8 | 2 Street Add | dress (P.O. Box Number is Not Acceptabl | le) |
| | | | 8 | 3 | | |
| | | | 8 | 4 City | | FL 85 Zip Code |
| 11. Pursuant t office or re agent. I ar | o the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga | Pand 607.1508, Florida Statul of Florida Such change was tions of, Section 607.0505, FI | les, the abo authorized orida Statut | ve-named cor by the corpora as. | rporation submits this statement for the pration's board of directors. I hereby accep | |
| SIGNATURE | Signature, typed or printed name of registered ager | d moderate of managements | it - Granial Time A | | uired when reinslating) | DATI . |
| 12. | OFFICERS AND | | 13. | gent alguature requ | ADDITIONS/CHANGES TO OFFICE | and the contract of the contra |
| TITLE | D | DELETE | 1.1 101.6 | | | Change Addit-on |
| NAME | ANKIEL, DEBRA | | 1.2 NAM | | | |
| STREET ADDRESS | 2326 OAK DRIVE | | 1.3 5185 | EL ADDRESS | | |
| CITY-ST-ZIP | FORT PIERCE FL 34949 | | 14 CITY | | | |
| TITLE | D | DETETE | 21 1111 | | | Change Addition |
| NAME | GOFF, RANDY | | 2.2 NAM | | | |
| STREET ADDRESS | 5007 SAN DIEGO AVENUE | | | ET ADDRESS | | 1 |
| CITY-ST-ZIP | FORT PIERCE FL 34949 | | | (-S1-ZIP | | |
| TITLE | D | DOLLOE | 3.1 1011 | | | Change Addition |
| NAME | BAIDEME, TED | | 3.2 NAM | | | |
| STREET ADDRESS | 3399 LEWIS STREET | | | T1 ADDRESS | | |
| CITY-ST-ZIP | FORT PIERCE FL 34981 | | | (- S1 - ZIP | | |
| TITLE | | DLLETE | 4.1 1111 | | | Change Addition |
| NAME | | | 4. 2 NAN | AE . | | |
| STREET ADDRESS | | | 4.3 S1R6 | LLADORESS | | 1 |
| CITY-ST-ZIP | | | | -\$1-7IP | | |
| | | DELETE | 5.1 TiTL | | AND THE RESIDENCE OF THE PROPERTY OF THE PROPE | Change Addition |
| TITLE NAME | | | 5.2 NAM | | | |
| STREET ADDRESS | • | | | ET ADDRESS | | |
| CITY-ST-ZIP | | | | - S1- ZIP | | |
| TITLE | | ☐ DELFTE | 6.1 1/11 | | | Change Addition |
| NAME | | | 6.2 NAM | | | |
| STREET ADDRESS | | | | E1 ADDRESS | | |

Too hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.