# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 26, 2006**
**Secretary of State**

DOCUMENT# P97000033985

**Entity Name:** SYMOGRAPHY, INC.

**Current Principal Place of Business:**

38435 NORTH AVE
ZEPHYRHILLS, FL 33542

**New Principal Place of Business:**

**Current Mailing Address:**

38435 NORTH AVE
ZEPHYRHILLS, FL 33542

**New Mailing Address:**

**FEI Number: 59-3446979** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

EBERLE, LAWRENCE
38435 NORTH AVE
ZEPHYRHILLS, FL 33542 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: EBERLE, LAWRENCE
Address: P.O.BOX 133
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: D ( ) Delete
Name: RIDDLE, WILLIAM
Address: 39021 11TH AVENUE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: PS ( ) Delete
Name: EBERLE, LAWRENCE
Address: P.O.BOX 133
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: VP ( ) Delete
Name: RIDDLE, WILLIAM
Address: 39021 11TH AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: T ( ) Delete
Name: RIDDLE, CAROL
Address: 39021 11TH AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition
Name: EBERLE, LAWRENCE
Address: 38435 NORTH AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PS (X) Change ( ) Addition
Name: EBERLE, LAWRENCE
Address: 38435 NORTH AVE
City-St-Zip: ZEPHYRHILLS, FL 32542

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LAWRENCE EBERLE D 03/26/2006

Electronic Signature of Signing Officer or Director — Date