

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000061749

Entity Name: SYMO TECHNOLOGIES, INC.

FILED  
Apr 20, 2006  
Secretary of State

## Current Principal Place of Business:

2315 NW 52ND PL  
GAINESVILLE, FL 32605 US

## New Principal Place of Business:

8560 SW 10TH ROAD  
GAINESVILLE, FL 32607 US

## Current Mailing Address:

2315NW 52ND PL  
GAINESVILLE, FL 32605 US

## New Mailing Address:

8560 SW 10TH ROAD  
GAINESVILLE, FL 32607 US

FEI Number: 59-3457862

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMONDS, RENAE  
2315 NW 52ND PL  
GAINESVILLE, FL 32605 US

## Name and Address of New Registered Agent:

SIMONDS, RENAE  
8560 SW 10TH ROAD  
GAINESVILLE, FL 32607 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:

04/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SIMONDS, JON B  
Address: 2315 NW 52ND PL  
City-St-Zip: GAINESVILLE, FL 32605

Title: ST ( ) Delete  
Name: SIMONDS, RENAE S.  
Address: 2315 NW 52ND PL  
City-St-Zip: GAINESVILLE, FL 32605

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SIMONDS, JON B  
Address: 8560 SW 10TH ROAD  
City-St-Zip: GAINESVILLE, FL 32607

Title: ST (X) Change ( ) Addition  
Name: SIMONDS, RENAE S.  
Address: 8560 SW 10TH ROAD  
City-St-Zip: GAINESVILLE, FL 32607

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: RENAE S. SIMONDS

ST

04/20/2006

Electronic Signature of Signing Officer or Director

Date