

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000053044

1. Entity Name
SYNERGY TRAINERS AND CONSULTANTS, P.A.



Principal Place of Business
1612 CYPRESS POINT COURT
VENICE, FL 34293

Mailing Address
1612 CYPRESS POINT COURT
VENICE, FL 34293



01122004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0840355

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LYNCH, KEVIN J DR.
1612 CYPRESS POINT COURT
VENICE, FL 34293

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Kevin J. Lynch KEVIN J. LYNCH 1-19-04 JK
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DR.
LYNCH, KEVIN J
1612 CYPRESS POINT COURT
VENICE, FL 34293

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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000000010249
01/22/04-80024-004 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Kevin J. Lynch KEVIN J. LYNCH, PRES. 1/12/04 941-493-4376
Signature and typed or printed name of signing officer or director Date Daytime Phone #