2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# P99000013268

Entity Name: SYNERGY NETWORKS, INC.

Current Principal Place of Business:

10970 S. CLEVELAND AVENUE
SUITE 406
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

10970 S. CLEVELAND AVENUE
SUITE 406
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0897133 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEIF, PETER
2075 W FIRST STREET
SUITE 200
FORT MYERS, FL 33901 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: VPSM ( ) Delete
Name: EARLY, MICHAEL
Address: 15081 TAMARIND CAY CT.
City-St-Zip: FORT MYERS, FL 33908

Title: VPNO ( ) Delete
Name: PATRICK, CHRISTOPHER
Address: 12863 JULIP CT
City-St-Zip: FORT MYERS, FL 33912

Title: P ( ) Delete
Name: SELF, PETER
Address: 6930 WITTMAN DR
City-St-Zip: FORT MYERS, FL 33919

Title: VPF ( ) Delete
Name: BOYD, KENNETH R
Address: 1764 LAKEVIEW BLVD.
City-St-Zip: FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: KENNETH R BOYD VPF 04/28/2009

Electronic Signature of Signing Officer or Director — Date