

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000044996

Entity Name: SYNERGY HEALTH NORTH AMERICA, INC.

Current Principal Place of Business:

401 E JACKSON STREET
SUITE 3100
TAMPA, FL 33602

Current Mailing Address:

401 E JACKSON STREET
SUITE 3100
TAMPA, FL 33602 US

FEI Number: 59-3252632

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name STEEVES, RICHARD
Address 401 E JACKSON STREET
 SUITE 3100
City-State-Zip: TAMPA FL 33602

Title VP
Name REILLEY, RAY
Address 401 E JACKSON STREET
 SUITE 3100
City-State-Zip: TAMPA FL 33602

Title VP
Name HORNBECK, JOHN
Address 401 E JACKSON STREET
 SUITE 3100
City-State-Zip: TAMPA FL 33602

I hereby 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 all other like empowered.

SIGNATURE: JOHN HORNBECK

VP

04/20/2015

Electronic Signature of Signing Officer/Director Detail

Date