

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# N00000007308

Entity Name: S4P SYNERGY, INC.

Current Principal Place of Business:

24 BASS AVENUE SW
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

PO BOX 1626
FT WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 59-3676322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACK, LIN A
703 OVERBROOK DRIVE
FORT WALTON BEACH, FL 32547 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

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: SABB, LATINA
Address: 13 CHATELAINE CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: C () Delete
Name: MACK, LIN A
Address: 703 OVERBROOK DR.
City-St-Zip: FT WALTON BEACH, FL 32547

Title: D () Delete
Name: HILLS, MARVA
Address: 726 KAREN AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: DS () Delete
Name: BUCHANAN, ARICA
Address: 118 WOODBINE CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D () Delete
Name: GREENLEE QUIONN, GWENDOLYN
Address: 78 5TH STREET
City-St-Zip: SHALIMAR, FL 32579

Title: D () Delete
Name: TORRY, GREGORY
Address: 123 PALMETTO AVENUE
City-St-Zip: MARY ESTHER, FL 32569

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: DS (X) Change () Addition
Name: JONES, KEIRA
Address: 1638 FLORENCE AVE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D (X) Change () Addition
Name: MERIWEATHER, STEPHEN
Address: 1971 CHESAPEAKE RIDGE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: DVC (X) Change () Addition
Name: JESSE, JACKSON
Address: 9 11TH STREET
City-St-Zip: SHALIMAR, FL 32579

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LIN A. MACK

Electronic Signature of Signing Officer or Director

C

03/20/2008

Date