

# 2001 UNIFORM BUSINESS REPORT (UBR)

0012511 AF

DOCUMENT # **A97000001436**

1. Entity Name

**SY-KLONE INTERNATIONAL, LIMITED**

**FILED**

Principal Place of Business

**444 THIRD STREET  
NEPTUNE BEACH FL 32266**

Mailing Address

**P.O. BOX 50457  
JACKSONVILLE BEACH FL 32240-0457**

**01 APR 23 PM 12:35**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



2. Principal Place of Business

3. Mailing Address

**444 THIRD STREET**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**NEPTUNE BEACH, FL**

4. FEI Number

**59-3492344**

Applied For

Not Applicable

Zip

Country

Zip

**32266**

Country

**US**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOULD, STEPHEN A ESQUIRE  
444 THIRD STREET  
NEPTUNE BEACH FL 32266**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

**\$400,000.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$400,000.00**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **J35101**  
NAME **THE SY-KLONE COMPANY**  
STREET ADDRESS **6541-1 POWERS AVENUE**  
CITY-ST-ZIP **JACKSONVILLE FL 32217**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

**3000004162479-3**  
**-05/08/01--01082--022**  
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CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE: BY THE SY-KLONE COMPANY**  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER**  
**JAMES G. MOREDOCK, PRES. FEB. 01, 2001 9044486563**

CR2E003 (11/00)