

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 03, 2002 8:00 am**  
**Secretary of State**

09-03-2002 90112 001 \*\*\*550.00

DOCUMENT # **J01620**

1. Entity Name

**SYMONS INTERNATIONAL GROUP, INC.**

**SYMONS INTERNATIONAL GROUP (FL), INC.**

Principal Place of Business

**21577 WOODSTREAM TERR  
 BOCA RATON FL 33428  
 US**

Mailing Address

**4720 KINGS WAY DRIVE  
 INDIANAPOLIS IN 46205  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2667118**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STANTON, JEFF**

**21577 WOODSTREAM TERR.  
 BOCA RATON FL 33428**

Name

**Nancy Fellows**

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

**2300 Glades Rd E Tower, Ste. 135**

City

**Boca Raton**

**FL**

Zip Code  
**33431**

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. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CD** ☐ Delete  
 NAME **SYMONS, G. GORDON**  
 STREET ADDRESS **4720 KINGSWAY DR**  
 CITY-ST-ZIP **INDIANAPOLIS IN 46205**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **PD** ☐ Delete  
 NAME **SYMONS, DOUGLAS H.**  
 STREET ADDRESS **4720 KINGSWAY DR.**  
 CITY-ST-ZIP **INDIANAPOLIS IN**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **VTD** ☐ Delete  
 NAME **SYMONS, ALAN G**  
 STREET ADDRESS **4720 KINGSWAY RD**  
 CITY-ST-ZIP **INDIANAPOLIS IN**

TITLE **D** ☒ Change ☐ Addition  
 NAME **Symons, Alan G.**  
 STREET ADDRESS **4720 Kingsway Dr., Indianapolis**  
 CITY-ST-ZIP **IN 46205**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
 NAME **Kirk Symons**  
 STREET ADDRESS **4720 Kingsway Dr.**  
 CITY-ST-ZIP **Indianapolis, IN 46205**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
 NAME **David Kadar**  
 STREET ADDRESS **4720 Kingsway Dr**  
 CITY-ST-ZIP **Indianapolis, IN 46205**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
 NAME **Travis J. Elbert**  
 STREET ADDRESS **4720 Kingsway Dr.**  
 CITY-ST-ZIP **Indianapolis, IN 46205**

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Douglas H. Symons**

**317-259-6420**

Date **7-10-02** Daytime Phone #

CR2E034 (9/01)

*Attachment*

# 997000101839

124750



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 31, 2002

SYMONS INTERNATIONAL GROUP (FLORIDA), INC.  
4720 KINGS WAY DRIVE  
INDIANAPOLIS, IN 46205 US

SUBJECT: SYMONS INTERNATIONAL GROUP (FLORIDA), INC.  
Ref. Number: J01620

We have received your document for SYMONS INTERNATIONAL GROUP (FLORIDA), INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

We are unable to waive or reduce the late fee. The corporation received the corporate annual report/uniform business report and notice that failure to file the report by May 1 would result in a \$400.00 late fee.

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers  
Document Specialist

Letter Number: 402A00046074