

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90151 002 ***150.00

DOCUMENT # P00244

1. Entity Name
SYMONS CORPORATION



Principal Place of Business
**200 EAST TOUHY AVE
DES PLAINES IL 60017
US**

Mailing Address
**7777 WASHINGTON VILLAGE DR
SUITE 130
DAYTON OH 45459
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 **06-1053316**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

Name **Corporation Service Company**

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

1201 Hays Street

City **Tallahassee**

FL

Zip Code
32301

8. The above named entity submits this statement for the purpose of changing its registered office, registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

Cynthia L. Harris
as its agent

SIGNATURE **Cynthia L. Harris**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/14/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PDCE** ☒ Delete
NAME **CICCARELLI, JOHN A.**
STREET ADDRESS **7777 WASHINGTON VILLAGE DR., STE 130**
CITY-ST-ZIP **DAYTON OH 45459**

TITLE **PDCE** ☐ Change ☒ Addition
NAME **STEPHEN MORREY**
STREET ADDRESS **7777 WASHINGTON VILLAGE DR, STE 130**
CITY-ST-ZIP **DAYTON, OH 45459**

TITLE **VPDC** ☐ Delete
NAME **MCILROY, ALAN F**
STREET ADDRESS **7777 WASHINGTON VILLAGE DR., STE 130**
CITY-ST-ZIP **DAYTON OH 45459**

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

TITLE **S** ☒ Delete
NAME **TARONJI, JR, JAIME**
STREET ADDRESS **7777 WASHINGTON VILLAGE DR. #130**
CITY-ST-ZIP **DAYTON OH 45459**

TITLE **S** ☐ Change ☒ Addition
NAME **Steven C. Huston**
STREET ADDRESS **7777 Washington Village Dr. Ste 130**
CITY-ST-ZIP **Dayton, OH. 45459**

TITLE **T** ☐ Delete
NAME **RUTHERFORD, JOHN M.**
STREET ADDRESS **7777 WASHINGTON VILLAGE DR., STE 130**
CITY-ST-ZIP **DAYTON OH 45459**

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

TITLE **VPDG** ☐ Delete
NAME **BARTHOLOMAE, RAYMOND E.**
STREET ADDRESS **200 E. TOUHY AVE., PO BOX 5018**
CITY-ST-ZIP **DES PLAINES IL 60017**

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

TITLE **VPAT** ☐ Delete
NAME **BENKA, JIM**
STREET ADDRESS **200 EAST TOUHY AVENUE**
CITY-ST-ZIP **DES PLAINES FL 60017**

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **John M. Rutherford** **4-2-03** **(937) 428-6360**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)