2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # P39062** Jan 21, 2000 8:00 am **Secretary of State** SAFETY-KLEEN (LONE AND GRASSY MOUNTAIN), INC. 01-21-2000 90069 034 ***150.00 Principal Place of Business Mailing Address 1301 GERVAIS ST 1301 GERVAIS ST SUITE 300 SUITE 300 COLUMBIA SC 29201-3326 C0008717 COLUMBIA SC 29201 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 73-0774247 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD SUITE 105 PLANTATION FL 33324 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PD ☐ Change ☐ Addition ☐ Delete TIT! F TITLE NAME NAME KENNETH W. WINGER STREET ADDRESS STREET ADDRESS 1301 GERVAIS ST. SUITE 300 CITY-ST-7IP CITY-ST-ZIP COLUMBIA SC 29201 ☐ Addition Change ☐ Delete TITLE DAVID M. SPRINKLE NAME STREET ADDRESS 1301 GERVAIS ST, SUITE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC 29201 Change ☐ Addition Delete TITLE NAME HENRY H. TAYLOR NAME STREET ADDRESS 1301 GERVAIS ST, SUITE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC 29201 ☐ Change ☐ Addition ☐ Delete TITLE TITLE PAUL R. HUMPHREYS NAME NAME STREET ADDRESS STREET ADDRESS 1301 GERVAIS ST, SUITE 300 CITY-ST-ZIP CITY-ST-ZIP COLUMBAL SC 29201 Change ☐ Addition ☐ Delete TITLE TITLE NAME WILLIAM D. RIDINGS NAME STREET ADDRESS STREET ADDRESS 1301 GERGAIS ST, SUITE 300 CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC ☐ Delete ☐ Addition **EVP** TITLE TITLE BRAGAGNOLO, MICHAEL JOSEPH NAME NAME STREET ADDRESS STREET ADDRESS 1301 GERAVIS ST, SUITE 300 CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC 29201

13. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

RATED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-2000

933 4279

Daytime Phone #

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