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Mar 03 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P39062 (5)

1. Corporation Name
UNITED STATES POLLUTION CONTROL, INC.



Principal Place of Business
220 OUTLET POINTE BLVD
ATTN: PAM KEEFE
COLUMBIA SC 29210
US

Mailing Address
P. O. BOX 21799
ATTN: PAM KEEFE
COLUMBIA SC 29221
US

3. Date Incorporated or Qualified
06/02/1992

3a. Date of Last Report
04/16/1996

4. FEI Number
73-0774247

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. Zip Country

25. Country

26. Mailing Address

27. Suite, Apt. #, etc.

28. City & State

29. Zip Country

30. Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
SUITE 105
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **P**
KENNETH W. WINGER

STREET ADDRESS **220 OUTLET POINTE BLVD.**
COLUMBIA SC

CITY - ST - ZIP

TITLE DELETE

NAME **DAVID M. SPRINKLE**

STREET ADDRESS **220 OUTLET POINTE BLVD.**
COLUMBIA SC

CITY - ST - ZIP

TITLE DELETE

NAME **S**
HENRY H. TAYLOR

STREET ADDRESS **220 OUTLET POINTE BLVD.**
COLUMBIA SC

CITY - ST - ZIP

TITLE DELETE

NAME **T**
PAUL R. HUMPHREYS

STREET ADDRESS **220 OUTLET POINT BLVD.**
COLUMBIA SC

CITY - ST - ZIP

TITLE DELETE

NAME **AT**
WILLIAM D. RIDINGS

STREET ADDRESS **220 OUTLET POINTE BOULEVARD**
COLUMBIA SC

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE **Sr. Vice-President** Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Henry H. Taylor** **Y 2197** **803-796-2006**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)