

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Mar 26 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P39062 (5)**  
 1. Corporation Name  
**LIDLAW ENVIRONMENTAL SERVICES (LONE AND GRASSY MOUNTAIN), INC.**



Principal Place of Business <b>220 OUTLET POINTE BLVD                  ATTN: PAM KEEFE                  COLUMBIA SC 29210                  US</b>	Mailing Address <b>P. O. BOX 21799                  ATTN: PAM KEEFE                  COLUMBIA SC 29221                  US</b>
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DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified  
**06/02/1992**

2. Principal Place of Business <b>21 1301 Gervais Street</b> Suite, Apt. #, etc. <b>22 SUITE 300</b> City & State <b>23 Columbia, SC</b> Zip <b>24 29201</b>	2a. Mailing Address <b>26 1301 Gervais St.</b> Suite, Apt. #, etc. <b>27 SUITE 300 ATTN: ANITA K. D'AMATO</b> City & State <b>28 Columbia SC</b> Zip <b>29 29201</b>	Country <b>25 USA</b>	Country <b>30 USA</b>
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4. FEI Number <b>73-0774247</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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	<b>FL</b>
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 \_\_\_\_\_ (NOTL: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KENNETH W. WINGER</b>		1.2 NAME	
STREET ADDRESS <b>220 OUTLET POINTE BLVD.</b>		1.3 STREET ADDRESS <b>1301 Gervais St., Suite 300</b>	
CITY-ST-ZIP <b>COLUMBIA SC</b>		1.4 CITY-ST-ZIP <b>29201</b>	
TITLE <b>SRVP</b>	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>DAVID M. SPRINKLE</b>		2.2 NAME	
STREET ADDRESS <b>220 OUTLET POINTE BLVD.</b>		2.3 STREET ADDRESS <b>1301 Gervais St, Suite 300</b>	
CITY-ST-ZIP <b>COLUMBIA SC</b>		2.4 CITY-ST-ZIP <b>29201</b>	
TITLE <b>S</b>	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HENRY H. TAYLOR</b>		3.2 NAME	
STREET ADDRESS <b>220 OUTLET POINTE BLVD.</b>		3.3 STREET ADDRESS <b>1301 Gervais Street, Suite 300</b>	
CITY-ST-ZIP <b>COLUMBIA SC</b>		3.4 CITY-ST-ZIP <b>29201</b>	
TITLE <b>T</b>	<input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>PAUL R. HUMPHREYS</b>		4.2 NAME	
STREET ADDRESS <b>220 OUTLET POINT BLVD.</b>		4.3 STREET ADDRESS <b>1301 Gervais Street, Suite 300</b>	
CITY-ST-ZIP <b>COLUMBAI SC</b>		4.4 CITY-ST-ZIP <b>29201</b>	
TITLE <b>AT</b>	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>WILLIAM D. RIDINGS</b>		5.2 NAME	
STREET ADDRESS <b>220 OUTLET POINTE BOULEVARD</b>		5.3 STREET ADDRESS <b>1301 Gervais Street, Suite 300</b>	
CITY-ST-ZIP <b>COLUMBIA SC</b>		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <b>EVP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME <b>MICHAEL JOSEPH BRAGAGNOLA</b>	
STREET ADDRESS		6.3 STREET ADDRESS <b>1301 Gervais Street, Suite 300</b>	
CITY-ST-ZIP		6.4 CITY-ST-ZIP <b>Columbia, SC 29201</b>	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(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 as an attachment with an address

SIGNATURE: \_\_\_\_\_ **3-4-98 803-933-4279**

CP2E034 (10/97)