2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S23474

Entity Name: ENVIROCYCLE, INC.

Current Principal Place of Business:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054

Current Mailing Address:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054 US

FEI Number: 65-0243954

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	DIRECTOR	Title	PRESIDENT
Name	GOEBEL, BRIAN A.	Name	BOYER, ROBERT B.
Address	18500 NORTH ALLIED WAY	Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054	City-State-Zip:	PHOENIX AZ 85054
Title	VP, SECRETARY	Title	VP
Name	SCHULER, EILEEN B.	Name	AMICK, JAMEY
Address	18500 NORTH ALLIED WAY	Address	323 MARBLE MILL ROAD
City-State-Zip:	PHOENIX AZ 85054	City-State-Zip:	MARIETTA GA 30060
Title	VP	Title	VP, ASSISTANT SECRETARY
Name	BRUMMER, GREGG K.	Name	WILHOIT, ADRIENNE W.
Address	18500 NORTH ALLIED WAY	Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054	City-State-Zip:	PHOENIX AZ 85054
Title	VP, ASSISTANT SECRETARY	Title Name	VP, ASSISTANT SECRETARY NICKERSON, JOHN B.
Name	ULREICH-POWER, THOMAS D.	Address	18500 NORTH ALLIED WAY
Address	18500 NORTH ALLIED WAY	City-State-Zip:	PHOENIX AZ 85054
City-State-Zip:	PHOENIX AZ 85054		

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EILEEN B. SCHULER

VICE PRESIDENT, SECRETARY 04/26/2020

Date

Date

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	VP, ASSISTANT SECRETARY	Title	VP, TAX
Name	THOMSON, JENNIFER L.	Name	FOCAZIO, LAWRENCE D.
Address	18500 NORTH ALLIED WAY	Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054	City-State-Zip:	PHOENIX AZ 85054

Title	TREASURER
Name	BOYD, CALVIN R.
Address	18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054