2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000931

Entity Name: COMPACTOR RENTAL SYSTEMS OF DELAWARE, INC.

FILED
Apr 27, 2020
Secretary of State
6258187994CC

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: 65-0723614 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

Date

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 Title VP

NameSCHULER, EILEEN B.NameGOODSELL, BRENTAddress18500 NORTH ALLIED WAYAddress832 LANGSDALE AVECity-State-Zip:PHOENIX AZ 85054City-State-Zip:INDIANAPOLIS IN 46202

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 VP, ASSISTANT SECRETARY

Name ULREICH-POWER, THOMAS D. Name NICKERSON, JOHN B.

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 SECRETARY 04/27/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP, ASSISTANT SECRETARY Title VP, TAX

NameTHOMSON, JENNIFER L.NameFOCAZIO, LAWRENCE D.Address18500 NORTH ALLIED WAYAddress18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title SECRETARY Title TREASURER

Name SCHULER, EILEEN B. Name BOYD, CALVIN R.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054