2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000931

Entity Name: COMPACTOR RENTAL SYSTEMS OF DELAWARE, INC.

FILED Apr 16, 2014 **Secretary of State** CC9252200807

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:

Date Electronic Signature of Registered Agent

Title

Address

Officer/Director Detail :

Title DIRECTOR, VP Title DIRECTOR, EXECUTIVE VICE

PRESIDENT

PRESIDENT

832 LANGSDALE AVE.

DELGHIACCIO, BRIAN M. Name EDDLEBLUTE, STEVEN HEATH Name 18500 NORTH ALLIED WAY Address

18500 NORTH ALLIED WAY Address

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

Title DIRECTOR

GOEBEL, BRIAN A. Name Name BOSWELL, JUSTIN

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 INDIANAPOLIS IN 46202

City-State-Zip:

\/P Title

VP, ASSISTANT SECRETARY Title Name BALES. BRIAN A.

Name BENTER, TIM M. 18500 NORTH ALLIED WAY Address

Address 18500 NORTH ALLIED WAY

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

Title VP, ASSISTANT SECRETARY Title VΡ

EGGLESTON, W. T. JR. Name Name GOODSELL, BRENT

18500 NORTH ALLIED WAY Address Address 1633 HIGHWOOD BLVD. WEST

PHOENIX AZ 85054 City-State-Zip: PONTIAC MI 48340 City-State-Zip:

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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.

04/16/2014 SIGNATURE: EILEEN B. SCHULER SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP Title VP

Name OLSON, JAMES H Name RISSMAN, MICHAEL P.

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, TAX

Name SWEET, ANDREW J. Name FOCAZIO, LAWRENCE

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

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

Title SECRETARY Title ASSISTANT SECRETARY

NameSCHULER, EILEEN B.NameSTRIEBEL, DOUGLASAddress18500 NORTH ALLIED WAYAddress832 LANGSDALE AVE.

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: INDIANAPOLIS IN 46202

Title TREASURER Title ASSISTANT TREASURER

Name LANG, EDWARD A. III Name LACY, MARSHA A.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

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