

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90178 036 ***550.00

DOCUMENT # 823587

1. Entity Name
SAFETY-KLEEN SYSTEMS, INC.

Principal Place of Business Mailing Address
1 BRINCKMAN WY 1 BRINCKMAN WY
EGLIN IL 60123 EGLIN IL 60123
US US

2. Principal Place of Business 3. Mailing Address
1301 Gervais Street 1301 Gervais Street
 Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 300 Suite 300

City & State City & State
Columbia, SC Columbia, SC
 Zip Country Zip Country
29201 USA 29201 USA

4. FEI Number **39-6090019** Applied For
 Not Applicable
 5. Certificate of Status Desired ~~Additional Fee Required~~

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WINGER, KENNETH W 1301 GERVAIS ST STE 300 COLUMBIA SC 29201	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Henry H. Taylor 1301 Gervais Street Columbia, SC 29201	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRAGAGNOLA, MICHAEL J 1301 GERVAIS ST STE 300 COLUMBIA SC 29201	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Roy Dean Bullinger 1301 Gervais Street Columbia, SC 29201	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TAYLOR, HENRY H 1301 GERVAIS ST STE 300 COLUMBIA SC 29201	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Shawn L. DeJames 1301 Gervais Street Columbia, SC 29201	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HUMPHREYS, PAUL R 1301 GERVAIS ST STE 300 COLUMBIA SC 29201	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Larry W. Singleton 1301 Gervais Street Columbia, SC 29201	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Henry H. Taylor DATE: 5-7-2001 DAYTIME PHONE #: (803)933-4279
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A0067210



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)