

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 842889

1. Entity Name

SP RECYCLING CORPORATION

**FILED**  
**Aug 08, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90093 046 \*\*\*550.00

Principal Place of Business

1800 PARKWAY PLACE  
1020  
MARIETTA GA 30067  
US

Mailing Address

1800 PARKWAY PLACE  
1020  
MARIETTA GA 30067  
US

2. Principal Place of Business

1895 Phoenix Blvd

Suite, Apt. #, etc.

Suite 400

City & State

Atlanta GA

Zip  
30349-5533

Country

3. Mailing Address

Same as Principal

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

58-1312936

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. 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 \_\_\_\_\_ for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature of Registered Agent (NOTE: Registered Agent signature required when reinstating)

(NOTE: Registered Agent signature required when reinstating)

7/25/00

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	BURKE, JAMES L	SHADDOCK CREEK ROAD	DUBLIN GA	<input type="checkbox"/>
VD	FLETCHER, E. JAMES	1800 PARKWAY PLACE #1020	MARIETTA GA	<input type="checkbox"/>
PD	GORMAN, JOSEPH R.	SHADDOCK CREEK RD	DUBLIN GA	<input checked="" type="checkbox"/>
PD	GARY PETERS	1895 Phoenix BLVD SUITE 400	Atlanta, GA 30349-5533	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input checked="" type="checkbox"/>
S	C. GLENN GIDDENS	1895 Phoenix Blvd., Suite 400	ATLANTA, GA 30349-5533	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T	MARK O. CARTER	SHADDOCK CREEK RD	DUBLIN, GA	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 or other like empowered.

SIGNATURE:

C. Glenn Giddens  
C. Glenn Giddens

7/25/00

Date

912-275-6323

Daytime Phone #

CR2E034 (5/00)