

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90154 001 *4,400.00

DOCUMENT # 852198

1. Entity Name
SAFETY-KLEEN ENVIROSYSTEMS COMPANY

Principal Place of Business 1301 GERVAIS ST STE 300 COLUMBIA SC 29201 US	Mailing Address 1301 GERVAIS ST STE 300 COLUMBIA SC 29201 US
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State	City & State	4. FEI Number 94-2764195	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. <input type="checkbox"/> (See criteria on back)	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE: PD	WINGER, KENNETH W	<input checked="" type="checkbox"/> Delete	TITLE: PD	Henry H. Taylor	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	1301 Gervais Street	
STREET ADDRESS			STREET ADDRESS	Columbia, SC 29201	
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE: V	BRAGAGNOLA, MICHAEL J	<input checked="" type="checkbox"/> Delete	TITLE: VP	Roy Dean Bullinger	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	1301 Gervais Street	
STREET ADDRESS			STREET ADDRESS	Columbia, SC 29201	
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE: S	TAYLOR, HENRY H	<input checked="" type="checkbox"/> Delete	TITLE: S	Shawn L. DeJames	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	1301 Gervais Street	
STREET ADDRESS			STREET ADDRESS	Columbia, SC 29201	
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE: T	HUMPHREYS, PAUL R	<input checked="" type="checkbox"/> Delete	TITLE: T	Larry W. Singleton	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	1301 Gervais Street	
STREET ADDRESS			STREET ADDRESS	Columbia, SC 29201	
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: 5-8-01 Daytime Phone #: 803-933-4272

CR2E034 (10/00)