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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000006437 (7)**

1. Corporation Name

EMCON, INC.

Principal Place of Business	Mailing Address
400 EL CAMINO REAL SUITE 1200 SAN MATEO CA 94402-1708	400 EL CAMINO REAL SUITE 1200 SAN MATEO CA 94402-1708

2. Principal Place of Business	2a. Mailing Address
21 1921 Ringwood Avenue	26 1921 Ringwood Avenue
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 San Jose, CA	City & State 28 San Jose, CA
Zip / Country 24 95131-1721 25 Santa Clara	Zip / Country 29 95131-1721 30 Santa Clara

3. Date Incorporated or Qualified: 12/16/1994

3a. Date of Last Report: 02/20/1995

4. FEI Number: 94-1738964 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes XX Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Signature required for printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HERSON, EUGENE M 400 S. EL CAMINO REAL SAN MATEO CA 94402 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Vice Pres Steven W. Vincent 1317 S. 13th Avenue Kelso, WA 98626-2845 ☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD FORTIER, H. LEE 400 S. EL CAMINO REAL SAN MATEO CA 94402 ☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Vice Pres Gary O.McEntee Crossroads Corp. Center, One International Mahwah, NJ 07495 Plaza, Ste.700 ☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MORTYN, MOLLIE C 400 S. EL CAMINO REAL SAN MATEO CA 94402 ☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Vice Pres Donald R. Andres 1921 Ringwood Avenue San Jose, CA 95131-1721 ☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MOMBOISSE, R. MICHAEL 400 S. EL CAMINO REAL SAN MATEO CA 94402 ☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	Vice Pres Richard Peluso Crossroads Corp. Center, One International Mahwah, NJ 07495 Plaza, Ste. 700 ☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRIGGS, THORLEY D 400 S. EL CAMINO REAL SAN MATEO CA 94402 ☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	Vice Pres Peter W. Clifford 1921 Ringwood Avenue San Jose, CA 95131-1721 ☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V GRIFFITH, JR. E L. 8021 PHILLIPS HIGHWAY, STE 12 JACKSONVILLE FL ☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Peter W. Clifford 2/20/96 (408) 453-7300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #