## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address
1921 RINGWOOD AVE

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9400006437 (7)

EMCON, INC.

Principal Place of Business

1921 RINGWOOD AVE

SIGNATURE:

3. Date Incorporated or Qualified 12/16/1994 2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified 12/16/1994 3. Date of Last Report 03/01/1996 3. Date of Last Report 03/01/1996 4. FEt Number 94-1738964 5. Certificate of Status Desired 5. Certificate of Status Desired 7. City & State 7. City & State 7. City & State 8. Election Campaign Financing 7. Trust Fund Contribution 7. Added to Fees 7. Principal Place of Business 7. Principal Place of Business 8. This corporation has liability for intangible tax under s. 199.032, 9. Name and Address of Current Registered Agent 7. Prentice-HALL Corporation System, INC. 1201 HAYS ST. SUITE 105 7. All AHASSEE FL 32301 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 City 85 Street Address (P.O. Box Number is Not Acceptable) 85 Interest Agent 86 Street Address of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.050S, Florida Statutes.	US	US				
22.   Mailing Address   3.   Mailing Address   4.   FER Number					3. Date incorporated or Qualified 3a. Date of Last Report	
2. Principle Principle   3. Mailing Address   4. FER Number   Applied For   Applied					12/16/1994 03/01/1996	
Suite, Apt. #. doc. 2   27   27   28   27   28   28   28   2	Principal Place of Business     2a. Mailing Address					
City & State   27	26			<b>94-1738964</b> Not Applicable		
City & Strato   27   28   30   Trust Fund Contribution   \$5.00 May Be Added to Fees   \$29   28   30   Trust Fund Contribution   \$3.00 May Be Added to Fees   \$1.00						
20	27			Fee Required		
Country   Zp	<del></del>	City & State				
8. Name and Address of Current Registared Agent  THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105 TALLAHASSEE FL 32301  82 Street Address (P.O. Box Number is Not Acceptable)  10. Name and Address of New Registered Agent  11. Pursuant for the purpose of changing its registered office or registered agent, or both, in the State of 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 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 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 Statutes, the above-named dorporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of 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 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 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 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 Statutes, the above-named corporation submits this statement for the purpose of changing its registered values and the purpose of changing its registered values and the purpose of changing its registered values.  12. OFFICERS AND DIRECTORS IN 12  Pother Mark Turbular Values of the purpose of changing its registered values.  13. ADDITIONSCHANGES TO OFFICERS AND DIRECTO	23					
S. Name and Address of Current Registered Agent  THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105  TALLAHASSEE FL 32301  84  City  FL  85  Street Address (P.O. Box Number is Not Acceptable)  84  City  FL  85  Street Address (P.O. Box Number is Not Acceptable)  87  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 agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent. I are finally with, and accept the obligations of, Section 2005-056, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent. I are finally with and accept the obligations of, Section 2005-056, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered collector or registered agent agent. I are finally as althorized by the corporation's board of directors. I hereby society the appointment as registered agent agent. I are finally as althorized by the corporation's board of directors. I hereby society the appointment as registered agent agent. I are finally as althorized by the corporation's board of directors. I hereby society the appointment as registered agent agent. I are finally as althorized by the corporation's board of directors. I hereby society as engineering agent agent. I are finally as althorized by the corporation's board of directors. I hereby society as althorized by the corporation's board of directors. I hereby society and secretary agent agent. I are finally as althorized by the appointment as registered agent agent. I are finally as althorized by the appointment as registered agent agent. I are finally as althorized by the appointment as registered agent agent. I are finally as althorized by the appointment as registered agent agent. I are finally as althorized by the			_ '	′		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105 TALLAHASSEE FL 32301  83 Set City FL 85 Size or registered agend, or both, in the State of Florids, Such change was sufficized by the adovernance or progrations submits this statement for the purpose of changing its registered agend. I some familiar with, and accept the obligations of, Section 607 0500, Florida Statutes.  11. Pursuant to two provisions of Sections 607,0502 and 607,1508, Florida Statutes.  12. Conflict is manifer with, and accept the obligations of, Section 607 0500, Florida Statutes.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. DO CHECE S AND DIRECTORS IN 12  15. Conflict Research prend during of registered agend, strength and six a gentlement agend when reinstancy Date In the septiment and agend when reinstancy Date In the State of Florids Statutes.  15. Conflict Research prend during of registered agend, strength and six and strength and six						
Street Addices (P.O. Box Number is Not Acceptable)			81	Nom		
SUITE 105 TALLAHASSEE FL 32301  83  64 City FL 85 Zip Code ciffice or registered agent. I are in the State of Florida. Statuties, the above named experision submits this statement for the purpose of changing its registered agent. I are mainlier with, and accept the obligations of, Section 607,0506, Florida Statuties, the above named experision submits this statement for the purpose of changing its registered agent. I are mainlier with, and accept the obligations of, Section 607,0506, Florida Statuties.  SIGNATURE Signature piret or present agent and fix if agelerate  POTE Registered Statutes.  SIGNATURE Signature piret or present agent and fix if agelerate  POTE Registered statutes.  SIGNATURE Signature piret or present agent and fix if agelerate  POTE Registered statutes.  SIGNATURE Signature piret or present agent and fix if agelerate  POTE Registered statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LITHIE  PD		SYSTEM, INC.		INCOM	·	
TALLAHASSEE FL 32301    84   City				82 Street Address (P.O. Box Number is Not Acceptable)		
Section   Continue			83	<b></b>		
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 Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of Section 607,0505, Florida Statutes.  SIGNATURE  Signature byted in product dependent of product algorithms for applications of Section 607,0505, Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTER  HERSON, EUGENE M  400 S. EL CAMINO REAL  SAN MATEO CA 94402  1.60TY-ST-2P  MAME  FORTIER, H. LEE  400 S. EL CAMINO REAL  SAN MATEO CA 94402  1.00TY-ST-2P  MAME  MORTYN, MOLLIE C  3. SAN MATEO CA 94402  1.00TY-ST-2P  MOMBOISSE, R. MICHAEL  4. STIRET ADDRESS  MORTYN, MOLLIE C  3. SAN MATEO CA 94402  1. STIRET ADDRESS  MORTYN, MOLLIE C  3. SAN MATEO CA 94402  1. STIRET ADDRESS  MORTYN, MOLLIE C  4. STIRET ADDRESS  MORTYN, MOLLIE C  4. STIRET ADDRESS  MORTYN, MOLLIE C  3. STIRET ADDRESS  AD MATEO CA 94402  1. STIRET ADDRESS  AD MATEO CA	TALLAHASSEE FL 32301		0.5		·	
11. Pursuant to the provisions of Sections 607 0502 and 607 1506. Florida Statutios, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutios.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. DIVIDENT PROJECT OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. The power of particular required when rehistatory  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Interval of the provisions of Changing is registered agent algrature required when rehistatory  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Interval of the provisions of Changing is registered agent algrature required when rehistatory  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Interval of the provisions of Changing is registered agent algrature required when rehistatory  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Interval of the provisions of Changing is registered agent algrature required when rehistatory  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Interval of the provisions of Change is a particular to the provisions of Change is a particular to the company of the			84	City	85 Zip Code	
office or registered agent, or both, in the State of Florids. 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 5005, Pionded Statutes.  Signature hybrid or protect nature of registered agent and the it appointment agent agent and the it analysis. Poor in the state of Florids. PMCTE: Registered Agent age	44. D					
SIGNATURE    Signature   Signa	office or registered agent, or both, in the State of	ario 607, 1508, Florida Statut Florida. Such change was a	es, the abov authorized b	e-name y the co	to corporation's board of directors. I hereby accept the appointment as registered	
TILE  PD	agent. I am familiar with, and accept the obligation	ons of, Section 607,0505, Flo	orida Statute	<b>5</b> .		
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD    DELETE   11 TITLE   VD   Change   XXX Addition   VD   VD   VD   VD   VD   VD   VD   V	SIGNATURE.	To the William				
PD				ent signat.		
HERSON, EUGENE M 400 S. EL CAMINO REAL SIREEI ADDRESS AN MATEO CA 94402  NAME FORTIER, H. LEE OD DELETE  22 MAME FORTIER, H. LEE OD SIREEI ADDRESS AN MATEO CA 94402  LEXIVELETE SIREEI ADDRESS AN MATEO						
SIRRET ADDRESS CITY-ST-ZIP SAN MATEO CA 94402    10 S. EL CAMINO REAL SAN MATEO CA 94402   10 DELETE   21 TITLE   VD   Change   XX Additio   Change   XX Additio   Change   XX Additio   Change   XX Additio   Change   Change   XX Additio   Change	1				1 ***	
SAN MATEO CA 94402  TITLE  VD  DELETE  21 TITLE  VD  DELETE  22 MAME  FORTIER, H. LEE  400 S. EL CAMINO REAL  SAN MATEO CA 94402  TITLE  T  MOMBOISSE, R. MICHAEL  SIRRET ADDRESS  CITY-SI-ZIP  MOMBOISSE, R. MICHAEL  SIRRET ADDRESS  CITY-SI-ZIP  SAN MATEO CA 94402  TITLE  T  MOMBOISSE, R. MICHAEL  SIRRET ADDRESS  CITY-SI-ZIP  SAN MATEO CA 94402  TITLE  D  TO  TITLE  D  TO  TITLE  D  TO  TITLE  D  TO  TITLE  D  TO  TO  TITLE  D  TO  TO  TITLE  D  TO  TO  TO  TO  TITLE  D  TO  TO  TO  TO  TO  TO  TO  TO  TO	AND A EL CAMBIO DES			ANNOCCA		
TITLE VD	ALLIANTED OF ALLOW		•			
NAME STREET ADDRESS CITY-ST-ZIP SAN MATEO CA 94402		DELETE		51 - ZIP	San Jose, CA 93131	
STREET ADDRESS OUTY-SI-ZIP SAN MATEO CA 94402  1011LE S	1				1 7	
SAN MATEO CA 94402  ITTLE  S				ADDRES		
Change   MORTYN, MOLLIE C   STREET ADDRESS   MORTYN, MOLLIE C   32 NAME   Richard Peluso   One International Plaza, Suite 700	*** =				San Maten Ca 94402	
MORTYN, MOLLIE C SIREET ADDRESS CITY-SI-ZIP SAN MATEO CA 94402 TITLE T NAME MOMBOISSE, R. MICHAEL STREET ADDRESS CITY-SI-ZIP NAME MOMBOISSE, R. MICHAEL STREET ADDRESS CITY-SI-ZIP NAME MOMBOISSE, R. MICHAEL STREET ADDRESS CITY-SI-ZIP SAN MATEO CA 94402  TITLE D Change MANAE  MOMBOISSE, R. MICHAEL 4.2 NAME Jack M. Marzluft 4.3 STREET ADDRESS CITY-SI-ZIP Danyille, CA 94526  TITLE D Change MANE CITY-SI-ZIP DOUGlas P. Crane STREET ADDRESS CITY-SI-ZIP SAN MATEO CA 94402  TITLE D Change MANAE CITY-SI-ZIP STREET ADDRESS CITY-SI-ZIP SAN MATEO CA 94402  TITLE V COYONAGO CITY-SI-ZIP SAN MATEO CA 94402  TITLE V COYONAGO CITY-SI-ZIP SAN MATEO CA 94402  TITLE V COYONAGO CITY-SI-ZIP COYONAGO, CA 92118-3033  Change MANE CHY-SI-ZIP COYONAGO, CA 92118-3033  Change MANE CHY-SI-ZIP Change MANAE CHY-SI-ZIP COYONAGO, CA 92118-3033  Change MANE CHY-SI-ZIP Change MANAE CHY-SI-ZIP Change MANAE CHY-SI-ZIP COYONAGO, CA 92118-3033  Change MACKEO Drive, #700 Chicago, IL 60606  14. Tide pereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the		XXXVELETE		21-7IL		
SIREET ADDRESS  AND MATEO CA 94402  TITLE  T  MOMBOISSE, R. MICHAEL  STREET ADDRESS  STREET AD	1 -	Contract Con	•		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
SAN MATEO CA 94402   34 CITY-ST-ZIP   Mahwah				. 4000000	Kichara Pelusu   One International Diaza Suite 700	
TITLE T DELETE 4.1 TITLE D DAY DELETE 4.2 TITLE D DAY DELETE 4.3 STREET ADDRESS 400 S. EL CAMINO REAL 4.3 STREET ADDRESS SAN MATEO CA 94402 4.4 CITY-ST-ZIP Danyille. CA 94526  TITLE D D Change XX Addition DAME STREET ADDRESS 1.6 STREET ADDRESS 1.7 20 Avenida Del Mundo CITY-ST-ZIP SAN MATEO CA 94402 5.4 CITY-ST-ZIP COYONADO. CA 92118-3033  TITLE V SAN MATEO CA 94402 5.4 CITY-ST-ZIP COYONADO. CA 92118-3033  TITLE V SAN MATEO CA 94402 5.4 CITY-ST-ZIP COYONADO. CA 92118-3033  TITLE V SAN MATEO CA 94402 5.4 CITY-ST-ZIP COYONADO. CA 92118-3033  TITLE V SAN MATEO CA 94402 5.4 CITY-ST-ZIP COYONADO. CA 92118-3033  TITLE V SAN MATEO CA 94402 5.4 CITY-ST-ZIP COYONADO. CA 92118-3033  TITLE V STREET ADDRESS 8021 PHILLIPS HIGHWAY, STE 12 6.3 STREET ADDRESS 333 W. Wacker Drive, #700  CITY-ST-ZIP JACKSONVILLE FL 6.4 CITY-ST-ZIP Chicago. IL 60606  14. I do 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	l l					
MOMBOISSE, R. MICHAEL  STREET ADDRESS  400 S. EL CAMINO REAL  SAN MATEO CA 94402  TITLE  D  SAN MATEO CA 94402  TITLE  D  Change  XX Additio  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  TITLE  V  SAN MATEO CA 94402  TITLE  V  XX DELETE  STREET ADDRESS  TITLE  V  TITLE  TITLE  D  TITLE  D  TOTANGE  TITLE  D  TOTANGE  TITLE  D  TOTANGE  T		DELETE		21-ZIP		
STREET ADDRESS AN MATEO CA 94402  TITLE  D  SRIGGS, THORLEY D  STREET ADDRESS SITEET ADDRESS SIT	•	Las beiere	i .			
CITY-ST-ZIP SAN MATEO CA 94402  TITLE D SHIGGS, THORLEY D  STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAME GRIFF(TH, JR. E L.  STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS COMMAND STREET ADDRESS COM						
TITLE D						
BRIGGS, THORLEY D  STREET ADDRESS ST		XXX)ELETE	***	SI-ZIP		
STREET ADDRESS ONLY-S1-ZIP SAN MATEO CA 94402  TITLE V STREET ADDRESS ONLY-ST-ZIP NAME GRIFF(TH, JR. E L. STREET ADDRESS ONLY-ST-ZIP GROWN STREET ADDRESS ONLY-ST-ZIP STREET ADDRESS ONLY-ST-ZIP JACKSONVILLE FL  17.20 Avenida Del Mundo Coronado, CA 92118-3033  Change Wandditio Ch		(III) CLEEK			ו או	
CHY-ST-ZIP SAN MATEO CA 94402  TITLE V SAN MATEO CA 94402  TITLE V STARET ADDRESS CHY-ST-ZIP  STARET ADDRESS CHY-ST-ZIP  JACKSONVILLE FL  14. I do 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				r ADDDEC		
TITLE  V  GRIFF(TH, JR. E L.  STREET ADDRESS  CITY-ST-ZIF  JACKSONVILLE FL  14. I do 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			1			
NAME STREET ADDRESS CITY-ST-ZIP  GRIFF(TH, JR. E L.  62 NAME Peter Vardy 333 W. Wacker Drive, #700 Chicago, IL 60606  14. I do 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		XXXIELETE		סוי גוויי	D Channe Waddition	
STREET ADDRESS  6.3 STREET ADDRESS  CITY-ST-7IP  14. I do 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	•	COMPLLETE			<del>                                    </del>	
CITY-ST-ZIP JACKSONVILLE FL 6.4 CITY-ST-ZIP Chicago IL 60606  14. I do 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		19				
14. I do 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		14.				
information indicated on this persual country months about a property of the and appropriate and that my cloudy is the agent level affect as if made under only the		with this filing does not quali				
information into a single of this same deposit or supplementar an indicate port is true and a country of greater state and a separate of the same deposit or an adversarial or an indicate port is true and a country of the same deposit or an adversarial or an indicate port is true and a same deposit or an in	Information indicated on this annual report or sur	oplemental annual report is t	rue and acc	urate a	nd that my signature shall have the same legal effect as if made under path: the	
I am an officer or director of the corporation or the receiver or to stee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address.						

TOUINEDVice President

1/10/97

(408) 453-7300

FILED Feb 12 1997 8:00am Secretary of State

