APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT#

F94000006437

1. Corporation Name

EMCON, INC.

Principal Place of Business

Mailing Address

SIGNATURE:

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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SAN JOSE	WOOD AVE CA 95131-1721	SAN JOSE CA					
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If above a	ddresses are incorrect in any way, line thro	augh incorrect info	ormation and enter o	orrection helow	Keins	TATEMENT	
	ncipal Office Address, If Applicable		Office Address, If	Applicable		porated or Qualified	
	Mosside Blvd.		sside Blvd	•	To Do Busi	ness in Florida	2/16/1994
Suite, Apt. #	t, etc.	Suite, Apt. #, e	tc.		5. FEI Numbe		
City & State		City & State			3. 1 Et 14dii)06		Applied For
Monre	oeville, PA	Monroev	ille, PA		6.	94-1738964	Not Applicable
Zip	Country	Zip	Country	,	1 "		75 Additional Fee required
1514	6 United States	15146	Unit	<u>ed_States</u>	L CERTIFICATI	E OF CIVIOO DESIMES	for a Certificate of Status
7. Names a	and Street Addresses of Each Officer and/	or Director (Florid	da nonprofit corpora	tions must list at lea	ast 3 directors)		
Title(s)	Name of Officers and/or Directors			et Address of Each icer and/or Director		City / S	tate / Zip
PD	ANTHONY J. DELUCA XERSON XXXXXIII		1401 K STR XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	NW SUI	TE 801	WASHINGTON, DC XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	20005 2x
	JAMES M. REDWINE		2790 MOSSI	DE BLVD.		MONROEVILLE, P	A 15146
VP	MACENTERS SAURK OX	I	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	,	XXXXX	NEW HOUSEKING KOZAWSK	
٧	XERXINGESCER XVINCERIX		XISZKAINEWSE	BXXX.		SAMANOSENDAMOSKAK	
Т	RICHARD R. CONTE XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		2790 MOSSI XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	DE BLVD., NOTHEXE	<u> </u>	MONROEVILLE, P	
AS	JAMES J. PIERSON KAKEK KORKNIK		2790 MOSSI XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	DE BLVD.,		MONROEVILLE, P SANXIOSEXXX9513K	
СОВ	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	I	THER OFFIC			SANDANADERXONAS	X
	8. Name and Address of Current I			MO AND DI		Address of New Registered	Agent
,				Name		i	
0.7.0	ORPORATION SYSTEM					***	
				Street Address (F	P.O. Box Number	is Not Acceptable)	(1/2)
-,	T CORPROATION SYSTEM			Suite, Apt. #, Etc	- 00)0003510	7612\ \\ \\ \\ \
•	SOUTH PINE ISLAND ROAD				-	-12/21/000	107 14 0130/14
	FATION FL 33324			City		**** /'5U. But	- 1210101646.0.00
10. I, being	appointed the registered agent of the abo	ve named corpor	ation, am familiar wi	th and accept the o	bligations of Sect	tion 607.0505, F.S.	
Signature of Registered	Agent // Agent		2000			Date 12-Co	- 00
h	AND SEE SEE	GISTERED AGE	NT MUST SIGN				

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11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing

JAMES M. REDWINE

AND PPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

10/19/00

EMCON OFFICERS AND DIRECTORS

:

			٠	•			EMCON	COMPANY
Shipps, Mark H.	Rice, Frank C.	Redwine, James M.	Pierson, James J.	Peluso, Richard A.	Kirk, James G.	DeLuca, Anthony J.	Conte, Richard R.	OFFICER/DIRECTOR NAME
Vice President	Vice President	Director, Vice President, Asst. Secretary	Assistant Secretary	Vice President	Director, Vice President, Secretary	President and CEO	Vice President, Treasurer 2790 Mosside Boulevard	IIILE
7550 Lucerne Drive	2790 Mosside Boulevard	2790 Mosside Boulevard	2790 Mosside Boulevard	Crossroads Corporate Center	2790 Mosside Boulevard	1401 K Street, NW	2790 Mosside Boulevard	WORK ADDRESS 1
Suite 110				One International Blvd., Ste 700		Suite 801		WORK ADDRESS 2
Middleburg Hts	Monroeville	Monroeville	Monroeville	Mahwah	Monroeville	Washington	Monroeville	WORK CITY
오	PA	PA	PA	S	PA	DC	PA	WORK
44130	15146	15146	15146	07495	15146	20005	15146	¥ORK

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COMPANY	OFFICER/DIRECTOR NAME	THE .	WORK ADDRESS 1	WORK ADDRESS 2	WORK CITY	WORK WORK STATE ZIP	ZP WORK
			-				
EMCON	Soose, Harry J.	Director, Sr. Vice	2790 Mosside		Monroeville	PA	15146
		—President and CFO	Boulevard				_

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