

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State
 05-16-2002 90066 038 ***150.00

DOCUMENT # F98000004468

1. Entity Name
COVANTA WATER TREATMENT SERVICES, INC.

Principal Place of Business

**40 LANE ROAD
 FAIRFIELD NJ 07007-2615
 US**

Mailing Address

**40 LANE ROAD
 FAIRFIELD NJ 07007-2615
 US**

2. Principal Place of Business

Covanta Energy Corp
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-3807441

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

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 entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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	EVPT	<input checked="" type="checkbox"/> Delete
NAME	WHITMAN, WILLIAM E	
STREET ADDRESS	40 LANE ROAD	
CITY-ST-ZIP	FAIRFIELD FL 07007-2615	
TITLE	P	<input type="checkbox"/> Delete
NAME	MACKIN, SCOTT G	
STREET ADDRESS	40 LANE ROAD	
CITY-ST-ZIP	FAIRFIELD NJ 07007-2615	
TITLE	EVPS	<input type="checkbox"/> Delete
NAME	HOROWITZ, JEFFREY R	
STREET ADDRESS	40 LANE ROAD	
CITY-ST-ZIP	FAIRFIELD NJ 07007-2615	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WALTERS, LOUIS	
STREET ADDRESS	40 LANE ROAD	
CITY-ST-ZIP	FAIRFIELD NJ 07007-2615	
TITLE	VP	<input type="checkbox"/> Delete
NAME	STONE, BRUCE	
STREET ADDRESS	40 LANE ROAD	
CITY-ST-ZIP	FAIRFIELD NJ 07007-2615	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	EFFINGER, J.L.	
STREET ADDRESS	40 LANE ROAD	
CITY-ST-ZIP	FAIRFIELD NJ 07007-2615	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LOUIS M. WALTERS 4/2/02

Date

Daytime Phone #

973-888-7097

CR2E034 (9/01)