2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F9800005371 Mar 21, 2000 8:00 am 1. Entity Name STERICYCLE, INC. **Secretary of State** 03-21-2000 90058 010 ***150.00 Principal Place of Business Mailing Address 28161 N. KEITH DRIVE 28161 N. KEITH DRIVE LAKE FOREST IL 60045 LAKE FOREST IL 60045-4528 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 36-3640402 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Bequired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **PCEO** TITI F * SEE ATTACHED * Addition TITLE Delete MILLER, MARK C NAME NAME 28161 N. KEITH DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE FOREST IL 60045 CFO ☐ Change ☐ Addition ☐ Delete TITLE TITLE TEN BRINK, FRANK J NAME 28161 N. KEITH DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP LAKE FOREST IL 60045 ☐ Change ☐ Addition Delete TITLE TITLE LEE, LINDA L NAME 28161 N. KEITH DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE FOREST IL 60045 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE TOMASELLO, ANTHONY J NAME 28161 N. KEITH DRIVE STREET ADDRESS STREET ADDRESS LAKE FOREST FL 60045 CITY-ST-ZIP CITY-ST-ZIP COO ☐ Delete ☐ Change Addition TITLE KOGLER, RICHARD T NAME NAME 28161 N. KEITH DRIVE STREET ADDRESS. STREET ADDRESS LAKE FOREST IL 60045 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE GRAHAM, PATRICK F NAME NAME 13878 PARK CENTER ROAD, SUITE 490 STREET ADDRESS STREET ADDRESS CITY-ST-7IP HERNDON VA 20171 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:





The Specialist in Managing Medical Waste

<u>OFFICERS</u>

Mark C. Miller

President & CEO

Frank J.M. ten Brink

Chief Financial Officer/CAO

Richard T. Kogler

Chief Operating Officer

Anthony J. Tomasello Executive Vice President Chief

Technical Officer

BOARD OF DIRECTORS

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President & CEO Stericycle, Inc.

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John Patience

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