2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCÚMENT #

F98000005371

1. Entity Name

STERICYCLE, INC.



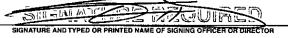
FILED Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90463 001 ***450.00

| 28161 N. KEITH DRIVE LAKE FOREST IL 60045 US 2. Principal Place of Business | | Mailing Address 28161 N. KEITH DRIVE LAKE FOREST IL 60045 US 3. Mailing Address | | |
|---|---|--|---------------------------------------|--|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | CHECK HERE IF MAKING CHANGES |
| City & State | | City & State | | 4. FEI Number 36-3640402 Applied For Not Applicable |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired S8.75 Additional Fee Required |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent |
| | | | Name | |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525 | | | Street Addres | (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. I am familiar with, and accept the obligations of registered agent. | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State | | | | 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ·□ Added to Fees |
| 10. | OFFICERS AND | DIRECTORS | 11. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PCEO MILLER, MARK C 28161 N. KEITH DRIVE LAKE FOREST IL 60045 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CFO TEN BRINK, FRANK J 28161 N. KEITH DRIVE LAKE FOREST IL 60045 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| | V Tomasello, anthony J 28161 N. Keith Drive Lake Forest Fl 60045 | ☐ Defete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | COO Kogler, Richard T 28161 N. Keith Drive Lake Forest Il 60045 | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition \ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Graham, Patrick F 13878 Park Center Road, Sun Herndon Va 20171 | ĭ ⊠ Delete TE 490 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Change Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _



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8476072176

Daytime Phone #