

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 04, 2002 8:00 am  
Secretary of State

02-04-2002 90201 001 \*\*\*750.00

DOCUMENT # F99000003626

1. Entity Name  
SAFETY-KLEEN (CONSULTING), INC.

Principal Place of Business

PO BOX 11393  
COLUMBIA SC 29211-1393

Mailing Address

PO BOX 11393  
COLUMBIA SC 29211-1393

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number  
36-3772680

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 ☒ Delete  
NAME ~~ARGUILLA, ROBERT~~  
STREET ADDRESS ~~1800 SALEM CHURCH ROAD~~  
CITY-ST-ZIP ~~IRMO SC 29063~~

TITLE ☐ Delete  
NAME AS  
BOYETTE, HARRIETT  
STREET ADDRESS 1318 AYLESFORD ROAD  
CITY-ST-ZIP CHARLOTTE NC 28211

TITLE ☐ Delete  
NAME CFOT  
SINGLETON, LARRY W  
STREET ADDRESS 8907 SOUTHERN BREEZE DRIVE  
CITY-ST-ZIP ORLANDO FL 32836

TITLE ☐ Delete  
NAME PD  
TAYLOR, HENRY H  
STREET ADDRESS 2640 PINE LAKE DRIVE  
CITY-ST-ZIP WEST COLUMBIA SC 29169

TITLE ☐ Delete  
NAME S  
DEJAMES, SHAWN  
STREET ADDRESS 103 HAMPTON CREST TRAIL  
CITY-ST-ZIP COLUMBIA SC 29209

TITLE ☐ Delete  
NAME SVP  
SPRINKLE, DAVID M  
STREET ADDRESS 132 MALLER HILL ROAD  
CITY-ST-ZIP COLUMBIA SC 29223

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Addition  
NAME SR VP  
michael A. Faucett  
STREET ADDRESS 1422 Sunbury Lane  
CITY-ST-ZIP Columbia, SC 29205

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME LARRY W. Singleton  
STREET ADDRESS 8907 Southern Breeze Drive  
CITY-ST-ZIP orlando, FL 32836

TITLE ☒ Change ☐ Addition  
NAME SHAWN LAVERY DEJAMES  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 132 mallet Hill Road  
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 the empowered.

SIGNATURE:

*Larry W. Singleton*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LARRY W. SINGLETON

Date

803-933-4200

Daytime Phone #

CP2E034 (9/01)