2002 UNIFORM BUSINESS REPORT (UBR)

May 01, 2002 8:00 am Secretary of State DOCUMENT # M67467 1. Entity Name 05-01-2002 91590 035 ***150.00 COVANTA PASCO, INC. Principal Place of Business Mailing Address C/O OGDEN CORP. **%OGDEN ENERGY** 2 PENN PLAZA - 26TH FLOOR 40 LANE RD NEW YORK, NY, 10121 NEW YORK NY 10121 2. Principal Place of Business 3. Mailing Address $\omega \alpha$ HO D (DUAN Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-3447536 Not Applicable Zip _ Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET **SUITE 105** TALLAHASSEE FL 32301 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (9/01) TITLE ☐ Delete TITLE ☐ Change ☐ Addition VD NAME NAME STONE, BRUCE W STREET ADDRESS STREET ADDRESS **40 LANE ROAD** CITY-ST-ZIP CITY-ST-ZIP FAIRFIELD NJ TREASURER TITLE **⊠** Delete TITLE Change ☐ Addition puis Walters NAME NAME whitman, william e STREET ADDRESS STREET ADDRESS **40 LANE ROAD** CITY-ST-ZIP CITY-ST-7IP FAIRFIELD NJ TITLE ☐ Delete TITLE Change Addition PD NAME NAME 'MACKIN, SCOTT G." STREET ADDRESS STREET ADDRESS **40 LANE ROAD** CITY-ST-ZIP CITY-ST-ZIP FAIRFIELD NJ ■ Delete Change ☐ Addition TITLE TITLE AS NAME NAME EFFINGER, J. L. STREET ADDRESS STREET ADDRESS 2 PENN PLAZA CITY-ST-7IP CITY-ST-7IP NEW YORK, NY. TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME HOROWITZ, JEFFREY STREET ADDRESS STREET ADDRESS **40 LANE ROAD** CITY-ST-ZIP CITY-ST-ZIP FAIRFIELD NJ TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED