

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P16065**

(5)

1. Corporation Name

ENVIROSOURCE, INC.



Principal Place of Business

Mailing Address

**FIVE HIGH RIDGE OFFICE PARK
P.O. BOX 10309
STAMFORD CT 06904-2309**

**FIVE HIGH RIDGE OFFICE PARK
P.O. BOX 10309
STAMFORD CT 06904-2309**

3. Date Incorporated or Qualified
09/23/1987

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
34-0617390

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **GUZZETTI, LOUIS A.**
STREET ADDRESS **5 HIGH RIDGE PARK**
CITY-ST-ZIP **STAMFORD CT**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **V** ☐ DELETE
NAME **FUEHRER, GEORGE E.**
STREET ADDRESS **5 HIGH RIDGE PARK**
CITY-ST-ZIP **STAMFORD CT**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **D**
2.3 STREET ADDRESS **Spogli, Ronald P.**
2.4 CITY-ST-ZIP **11100 Santa Monica Boulevard, Suite 1900
Los Angeles, CA 90025**

TITLE **V** ☐ DELETE
NAME **ANDERSON, AARNE**
STREET ADDRESS **5 HIGH RIDGE PARK**
CITY-ST-ZIP **STAMFORD CT**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **AS** ☐ DELETE
NAME **FITZSIMONS, JOHN H.**
STREET ADDRESS **230 PARK AVENUE**
CITY-ST-ZIP **NEW YORK NY**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **T**
4.3 STREET ADDRESS **Davis, William B.**
4.4 CITY-ST-ZIP **5 High Ridge Park
Stamford, CT 06904-2309**

TITLE **S** ☐ DELETE
NAME **HUBEN, CHRISTINA E**
STREET ADDRESS **5 HIGH RIDGE PARK**
CITY-ST-ZIP **STAMFORD CT**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **OWENS, C. RICHARD**
STREET ADDRESS **230 PARK AVENUE**
CITY-ST-ZIP **NEW YORK NY**

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **D**
6.3 STREET ADDRESS **Askins, Wallace B.**
6.4 CITY-ST-ZIP **5 High Ridge Park
Stamford, CT 06904-2309**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President

4/22/96

(203)321-1147

Date

Daytime Phone #

CR2E037 (12/95)