

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 21, 1999 8:00 am  
Secretary of State

04-21-1999 90205 040 \*\*\*150.00

DOCUMENT # P24478

1. Corporation Name

OGDEN ENVIRONMENTAL AND ENERGY SERVICES CO., INC

Principal Place of Business

3211 JERMANTOWN ROAD  
FAIRFAX VA 22030

Mailing Address

% OGDEN SERVICES TAX DEPT 26TH FLOOR  
2 PENNSYLVANIA PLAZA  
NEW YORK NY 10121  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/24/1989

4. FEI Number

52-1594168

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 4455 BROOKFIELD CORPORATE  
ROAD

26 Suite, Apt. #, etc.

22 SUITE 100

27 City & State

23 CHANTILLY VA 20151

28 Zip

24 Country

29 Zip

25 Country

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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 607.0502 and 607.1508, 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 607.0505, 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 #2

TITLE SVP ☐ DELETE  
NAME PUGH, THOMAS A  
STREET ADDRESS 3211 JERMANTOWN RD SUITE 300  
CITY-ST-ZIP FAIRFAX VA 22030

1.1 TITLE VP/DIRECTOR ☐ Change ☒ Addition  
1.2 NAME JEFFREY R. HOROWITZ  
1.3 STREET ADDRESS 40 LANE ROAD  
1.4 CITY-ST-ZIP FAIRFIELD NJ 07007-2615

TITLE SVP ☐ DELETE  
NAME WANCE, DENNIS M  
STREET ADDRESS 3211 JERMANTOWN RD SUITE 300  
CITY-ST-ZIP FAIRFAX VA 22030

2.1 TITLE SVP ☒ Change ☐ Addition  
2.2 NAME WANCE, DENNIS M  
2.3 STREET ADDRESS 4455 BROOKFIELD CORPORATE DRIVE, SUITE 100  
2.4 CITY-ST-ZIP CHANTILLY VA 20151

TITLE VP ☐ DELETE  
NAME NEYHARD, MARY E  
STREET ADDRESS 3211 JERMANTOWN RD SUITE 300  
CITY-ST-ZIP FAIRFAX VA 22030

3.1 TITLE SVP ☒ Change ☐ Addition  
3.2 NAME PUGH, THOMAS A  
3.3 STREET ADDRESS 4455 BROOKFIELD CORPORATE DRIVE, SUITE 100  
3.4 CITY-ST-ZIP CHANTILLY VA 20151

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE PD ☐ Change ☒ Addition  
4.2 NAME HENRY L. SANGER  
4.3 STREET ADDRESS 4455 BROOKFIELD CORPORATE DRIVE, SUITE 100  
4.4 CITY-ST-ZIP CHANTILLY VA 20151

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFREY R. HOROWITZ /4/5 /99 (212) 868-6133

Date

Daytime Phone #

CR2E034 (11/98)