FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthum

Secretary of State

DIVISION OF CORPORATIONS

1996

P27432

141

DOCUMENT # P27432 (4) 1. Corporation Name DU PONT ENVIRONMENTAL REMEDIATION SERVICES INC.									
Principal Place of	rincipal Place of Business Mailing Address					()(0 1)=1 =1=11	*****	
C/O DU PONT DENEMOURS AND CO 1007 MARKET ST. B-12312 WILMINGTON DE 19898			C/O DU PONT DENEMOURS AND CO 1007 N. MARKET ST. M-10608 WILMINGTON DE 19898			3. Date Incorporated or Qualified	3a Da	te of Last Rep	od
WILMINGTON	DE 13030	US				12/26/1989	Ju. Da	04/25/19	
2. Principal Place	ont Business	2a. Mailing	Address		·	4. FEI Number			plied For
26						51-0320842			t Applicable
Suite, Apt. #,	etc.	Suite,	Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Fee Re	Additional
		27				C Starting Comparing Language			
City & State		City 8	State			 Election Campaign Financing Trust Fund Contribution 			May Be to Fees
		28		Country		8. This corporation has liability for	intangible		
Zip D	Country	Z(p)	30			Florida Statutes	☐ No		
<u> </u>	9. Name and Address of Curre			<u>:1</u>		10. Name and Address of New I	Registere	d Agent	
	5. Name and Address of Con-	<u></u>		81	Name				
CT CORPORATION SYSTEM				82	Street A	ddress (P.O. Box Number is Not Accepta	ole)		
	PINE ISLAND ROAD			83					
PLANIA	TION FL 33324				ļ			85 Zip	Code
				84	1	poration submits this statement for the purposer of directors. Thereby accept the app	F		
familiar with	and accept the obligations of Sc	sation hardoon, i	TORGA OLGIUMS	espectared Appe		poration surmines this statement for the population of directors. I hereby accept the appropriate the constitution	DATE		
12.	OFFICERS A	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS A	Change	Addition
TITLE	PD		DELETE	E 1 DILE				L) onungo	
LAME	Burnham, M. E			1.5 NAME					
STREET ADDRESS	1007 MARKET ST. M-106	308			I ADDRESS				
CITY-ST-ZIP	WILMINGTON DE		F3 55 13 5	14 C TY - 1	ST-ZiP			Change	☐ Addition
TITLE	VT		DE: FIE	2.3 Tillef					
NAME	MCATEER, JOHN A	40000		. 22 NAME	I ADDRESS				
STREET ADDRESS	1007 MARKET ST, RM B	- 12303		2.3 STRCE 2.4 C:TY -					
CITY-ST-ZIP	WILMINGTON DE		DELETE	3 1 TITLE				Change	☐ Addition
TITLE	S DOUGLAC ANNUL			3 2 NAME					
NAME	DOUGLAS, ANN L.	ene			ET ADDRESS				
STREET ADDRESS	1007 MARKET ST. M-100	000		3.4 CITY -	1				
CITY-ST-ZIP	WILMINGTON DE		DELETE	4 ! TI'LE				Change	Addition
TITLE	ROMANELLI, RICHARD A	٨.	_	4.2 NAME					
NAME	1007 MARKET ST. M-10				FADORESS				
STREET ADDRESS	WILMINGTON DE			4.4.0(TY)					
CITY-ST-ZIP TITLE	D		X DELETE	5 1 THE		Dennis Reilley		X Change	Addition
NAME	JACKSON, NEO C			5.2 NAME		1007 Market St.			
STREET ADDRESS	1007 MARKET ST. M-10	608		5.3.5760	H ADDRESS	WIM DE 19898			
CITY-ST-ZIP	WILMINGTON DE			5.4 City		~ 1M OC 17878			
TITLE	THE MINTOLD IN		[] DELFIE	6 1 Talli				Change	Addition Addition
N SME				5.2 NAMI					

14. If 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 trusted 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

6.3 STREET ADDRESS

6.4 CITY - \$1 - 2IP

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OFFICER OR DIRECTOR

4/11/96 Care Carrier Proces