

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P93000066212**

1. Entity Name

**C & H RECYCLING CORPORATION****FILED**  
**Apr 24, 2001 8:00 am**  
**Secretary of State**

04-24-2001 90350 020 \*\*\*158.75

Principal Place of Business

**1903 EAST ADAMS ST  
JACKSONVILLE FL 32202  
US**

Mailing Address

**1903 EAST ADAMS ST  
JACKSONVILLE FL 32202  
US**

00040331



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**1903 East Adams Street**

Suite, Apt. #, etc.

3. Mailing Address

**1903 East Adams Street**

Suite, Apt. #, etc.

City & State  
**Jacksonville, FL 32202**City & State  
**Jacksonville, FL 32202**4. FEI Number **59-3203731**

Applied For

Not Applicable

Zip  
**32202**Country  
**Duval**Zip  
**32202**Country  
**Duval**5. Certificate of Status Desired ☒ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOLLFELDER, KURT FRANK  
1903 EAST ADAMS ST  
JACKSONVILLE FL 32202**Name  
**Kurt F. Hollfelder**Street Address (P.O. Box Number is Not Acceptable)  
**1903 East Adams Street**City  
**Jacksonville** **FL** Zip Code  
**32202**

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

Kurt F. Hollfelder

March 30, 2001

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
CARDEN, FERRELL J  
10015 RANDALLSTOWN LANE  
JACKSONVILLE FL 32256** ☒ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ST  
HOLLFELDER, KURT F  
2196 EVENTIDE ROAD  
JACKSONVILLE FL 32259** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
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CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Kurt F. Hollfelder**

March 30, 2001 (904) 356-0019

Date

Daytime Phone #

CR2E034 (10/00)