2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024532

Entity Name: STERICYCLE DIRECT RETURN, INC.

FILED Mar 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3800 S. CONGRESS AVE 28161 NORTH KEITH DRIVE SUITE #8 LAKE FOREST, IL 60045 L

BOYNTON BEACH, FL 33426 US

Current Mailing Address: New Mailing Address:

3800 S. CONGRESS AVE

SUITE #8

BOYNTON BEACH, FL 33426 US

28161 NORTH KEITH DRIVE
LAKE FOREST, IL 60045 US

FEI Number: 65-0618214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOHMAN, ROBERT D

6760 HOULTON CIRCLE
LAKE WORTH, FL 33467

US

CT CORPORATION
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

US

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: SARAH B AYALA 03/08/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 LOHMAN, ROBERT D
 Name:
 MILLER, MARK

 Address:
 6760 HOULTON CIRCLE
 Address:
 28161 NORTH KEITH DRIVE

 City-St-Zip:
 LAKE WORTH, FL 33467
 City-St-Zip:
 LAKE FOREST, IL 60045

Title: T () Delete Title: V (X) Change () Addition

 Name:
 RHINE, SCOTT T
 Name:
 KOGLER, RICHARD

 Address:
 4697 SABAL PALM DRIVE
 Address:
 28161 NORTH KEITH DRIVE

 City-St-Zip:
 BOYNTON BEACH, FL 33436
 City-St-Zip:
 LAKE FOREST, IL 60045

Title: COOD () Delete Title: T (X) Change () Addition

Name:TANNER, SIMON EName:TEN BRINK, FRANKAddress:4240 PALM FOREST DR S.Address:28161 NORTH KEITH DRIVECity-St-Zip:DELRAY BEACH, FL 33445City-St-Zip:LAKE FOREST, IL 60045

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK MILLER P 03/08/2006