

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114274

Entity Name: COVANTA PINELLAS, INC.**Current Principal Place of Business:**445 SOUTH STREET
MORRISTOWN, NJ 07960**Current Mailing Address:**445 SOUTH STREET
MORRISTOWN, NJ 07960**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title CEOP
Name ORLANDO, ANTHONY J
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

Title D
Name ORLANDO, ANTHONY J
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

Title SVDC
Name SIMPSON, TIMOTHY J
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

Title CFO
Name KHATTRI, SANJIV
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

Title SVP, CHIEF ACCOUNTING OFFICER
Name BUCKS, THOMAS
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

I hereby 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 all other like empowered.

SIGNATURE: THOMAS BUCKS**SVP, CHIEF ACCOUNTING 04/24/2013
OFFICER**_____
Electronic Signature of Signing Officer/Director Detail_____
Date