## 2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004980

Entity Name: NRC EAST ENVIRONMENTAL SERVICES, INC.

**Current Principal Place of Business:** 

18500 NORTH ALLIED WAY PHOENIX. AZ 85054

**Current Mailing Address:** 

18500 NORTH ALLIED WAY PHOENIX, AZ 85054 US

FEI Number: 04-2788344 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

FILED Apr 03, 2025

**Secretary of State** 

1450964563CC

Officer/Director Detail:

Title DIRECTOR Title PRESIDENT

Name CARLSEN, ELYSE M. Name ARAMBULA, JULIA

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP Title VP

Name WILHOIT, ADRIENNE W. Name NICKERSON, JOHN B.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP Title VP

NameKASARJIAN, ASHLEYNameLOWERY, GRETCHENAddress18500 NORTH ALLIED WAYAddress3 EDGEWATER DRIVECity-State-Zip:PHOENIX AZ 85054City-State-Zip:NORWOOD MA 02062

Title VP, TAX Title SECRETARY

Name FOCAZIO, LAWRENCE D. Name MCKEON, LAUREN

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

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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: LAUREN MCKEON SECRETARY 04/03/2025

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title ASSISTANT SECRETARY Title ASSISTANT SECRETARY
Name WILHOIT, ADRIENNE W. Name NICKERSON, JOHN B.
Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

TitleASSISTANT SECRETARYTitleTREASURERNameKASARJIAN, ASHLEYNameBOYD, CALVIN R.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054