#### 2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F24000003687

Entity Name: US ECOLOGY TRANSPORTATION SOLUTIONS, INC.

**FILED** Apr 03, 2025 **Secretary of State** 5472369624CC

### **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: 83-2879876 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:

Name

City-State-Zip:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR Title **PRESIDENT** 

CARLSEN, ELYSE M. Name Name ARAMBULA, JULIA

18500 NORTH ALLIED WAY 18500 NORTH ALLIED WAY Address Address

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

Title VICE PRESIDENT AND ASSISTANT Title VICE PRESIDENT AND ASSISTANT

Name

NICKERSON, JOHN B.

**SECRETARY SECRETARY** 

18500 NORTH ALLIED WAY 18500 NORTH ALLIED WAY Address Address

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

٧/P Title Title VICE PRESIDENT AND ASSISTANT

**SECRETARY** 

Name SCHEERER, VINCE Name KASARJIAN, ASHLEY

10613 W SAM HOUSTON PARKWAY Address 18500 NORTH ALLIED WAY NORTH Address

SUITE 300

PHOENIX AZ 85054 HOUSTON TX 77064 City-State-Zip:

WILHOIT, ADRIENNE W.

Title ۱/P Title

BINDER, SCOTT Name HENRY, MATTHEW 17440 COLLEGE PARKWAY Address

101 S. CAPITOL BLVD., SUITE 1000 Address SUITE 300

City-State-Zip: **BOISE ID 83702** City-State-Zip: LIVONIA MI 48152

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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.

04/03/2025 SIGNATURE: LAUREN MCKEON SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title VP Title VP, TAX

NameLOWERY, GRETCHENNameFOCAZIO, LAWRENCE D.Address3 EDGEWATER DRIVEAddress18500 NORTH ALLIED WAY

City-State-Zip: NORWOOD MA 02062 City-State-Zip: PHOENIX AZ 85054

Title SECRETARY Title TREASURER

Name MCKEON, LAUREN Name BOYD, CALVIN R.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

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