



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Rick Scott
Governor

Jennifer Carroll
Lt. Governor

Herschel T. Vinyard Jr.
Secretary

09/23/2011

Greg Dever, Office Director
Shaw Environmental Infrastructure Inc / Shaw Env Inc
1228 Winter Garden Vineland Rd
Winter Garden, FL 34787-4452

The Florida Department of Environmental Protection has reviewed your form 8700-12FL notification for a new hazardous waste DEP/EPA Identification Number or status/information change. Based on the information received you must use the following identification number for all manifests or reports for **Shaw Environmental Infrastructure Inc / Shaw Env Inc** located at **1228 Winter Garden Vineland Road, Winter Garden , FL34787**

FLD980799381

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not require a separate submission: Non-Handler of Hazardous Waste.**

Your facility is **currently registered** for the following activities: **HW Transporter (reg exp on 09/01/12).**

Your facility is **currently permitted** as: **No Active Hazardous Waste Treatment, Storage, or Disposal Permit.**

If you have pending program registrations/certifications or permits, these will be mailed separately. You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status, activity or contact information. The form is found here:

<http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm>.

To review the details of your status, visit:

http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLD980799381.

For further assistance, please e-mail a Notification Coordinator at EPOST_HWreg@dep.state.fl.us or call us at (850)245-8707.

Sincerely,


FOR

Glen Perrigan
Environmental Manager
Hazardous Waste Regulation Section

ME ID: 50745 , Email Address: greg.dever@shawgrp.com

Are your services commercially available? Yes

STATE OF FLORIDA

HAZARDOUS WASTE TRANSPORTER STATUS FORM

1. Transporter Identification:

Transporter Name: Shaw Environmental, Inc. / Shaw Environmental and Infrastructure, Inc.

Transporter EPA ID: FLD 980 799 381

Location Address: 1228 Winter Garden Vineland Road

Winter Garden, Florida 34787

Contact: Greg Dever

Telephone: (407) 287-3200

Mailing Address: 1228 Winter Garden Vineland Road

Winter Garden, Florida 34787

II. Insurance Information:

Insurance Company Chartis Specialty Insurance Co.

Address 1650 Market Street

Philadelphia, PA 19103

Contact: Monte Badasarian

Telephone: _____

Policy Number: CPO61823904

Expiration date: 9/1/2012

III. Waste Information:

EPA Waste Codes for Waste Routinely or Usually Transported:

D001 D008 D018 D039 D040 D042 _____

Comments: _____

IV. Certification:

I certify under penalty of law that the above information is true, correct, and complete to the best of my knowledge.

Gregory A. Dever

Office Director greg.dever@shawgrp.com

Print/Type Name

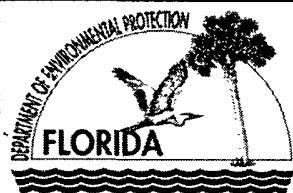
Title

Signature

8-31-11
Date Signed

V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The forms submitted by the transporter show compliance with the financial responsibility through _____ Date

Signature of Florida Department of Environmental Protection Representative Date Signed



**8700-12FL - FLORIDA NOTIFICATION OF
REGULATED WASTE ACTIVITY**
DEP Waste Management Division-HWRS. MS4560
2600 Blair Stone Rd. Tallahassee, FL 32399-2400
(850) 245-8772

Date Received
(for DEP Official Use Only)

Received

SEP 01 2011

EPA ID **F L D 9 8 0 7 9 9 3 8 1**

MTS

BSHW

**1. Reason for
Submittal**

Mark 'X' in
correct box:

- ☐ To provide **initial notification** (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).
- ☒ To provide **subsequent notification** (to update status and facility identification information).
- ☐ Is this the **final notification** (see instructions) for the facility?

**2. Facility or
Business Name**

**SHAW ENVIRONMENTAL AND
INFRASTRUCTURE INC.
FEID 753044680**

**SHAW ENVIRONMENTAL
FEID 77058932**

FEID No.

**3. Facility Operator
(List additional
Operators in the
comments section).**

Name of Operator:

Greg Dever

☐ New Operator

Date became Operator: / /
mm dd yy

Street or P.O. Box:

1228 Winter Garden Vineland Road

Phone Number:

407-287-3200

City or Town:

Winter Garden

State:

FL

Zip Code:

34787

Operator Type: ☒ Private

☐ Federal

☐ Municipal

☐ State

☐ Other

**4. Facility Physical
Location
Information**

Physical Street Address:

1228 Winter Garden Vineland Road

City or Town:

Winter Garden

State:

FL

Zip Code:

34787

County:

Orange

If available, please attach a map or sketch of the facility boundaries.

Latitude:

28

32

51

ssss

Longitude:

81

35

21

ssss

Method:

Datum:

**5. Facility North American Industry
Classification System (NAICS)
Code(s)**

A.

541620

B.

562910

C.

541330

D.

238910

**6. Facility or
Business Mailing
Address**

Street Address or P.O. Box:

1228 Winter Garden Vineland Road

City or Town:

Winter Garden

State:

FL

Zip Code:

34787

**7. Facility or
Business Contact
Person**

First Name:

Greg

Last Name:

Dever

Title:

Office Director

Phone Number:

407-287-3287

Extension:

E-Mail:

greg.dever@shawgrp.com

Street or P.O. Box:

1228 Winter Garden Vineland Road

City or Town:

Winter Garden

State:

FL

Zip Code:

34787

**8. Real Property
(Land) Owner
of the Facility's
Physical Location
(List additional
real property owners
in the comments
section.)**

Name of Real Property (Land) Owner:

Adler Winter Garden, LLC

☒ New Owner

Date became Owner: **07** / **01** / **10**
mm dd yy

Street or P.O. Box:

8018 Sunport Drive, Suite 201

Phone Number:

407-926-1821

City or Town:

Orlando

State:

FL

Zip Code:

32809

Owner Type: ☒ Private

☐ Federal

☐ Municipal

☐ State

☐ Other

9. Type of Regulated Waste Activity (Mark 'X' in all that apply):**A. Hazardous Waste Activities:****(1) Generator of Hazardous Waste**

(Choose only one of the following three categories.)

- ☐ a. Large Quantity Generator (LQG):
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of *non-acute* hazardous waste; or Greater than 1 kg (2.2 lbs) of *acute* hazardous waste
- ☐ b. Small Quantity Generator (SQG):
Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 lbs.) of *non-acute* hazardous waste and/or 1 kg (2.2 lbs) or less of *acute* hazardous waste
- ☐ c. Conditionally Exempt SQG (CESQG):
Generates in any calendar month 100 kg/mo or less (220 lbs.) of *non-acute* hazardous waste and 1 kg (2.2 lbs) or less of *acute* hazardous waste

In addition, indicate other generator activities that apply.

- ☐ d. United States Importer of hazardous waste
- ☐ e. Mixed Waste (hazardous and radioactive) Generator

For Items 2 through 7, mark 'X' in all that apply.

(2) Treater, Storer, or Disposer of Hazardous Waste

(at your facility) Note: A hazardous waste permit may be required for this activity.

- ☐ a. Operating Commercial TSD
- ☐ b. Operating Non-commercial TSD
- ☐ c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.)

(3) ☐ Recycler of Hazardous Waste (at your facility)Specify: ☐ Commercial; ☐ Non-Commercial.

A permit is required for storage prior to recycling.

(4) ☐ Exempt Boiler and/or Industrial Furnace

- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining Furnace Exemption

(5) ☐ Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities - Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization OR the authorization you received from FDEP.**(6) ☐ Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste.****(7) ☒ Transporter of Hazardous Waste [Note: A Certificate of Liability Insurance is required along with this registration.]**Registration must be renewed annually. ☐ a. For own waste only ☒ b. For commercial purposes**c. Hazardous Waste Transporter Insurance Information**Insurance Company Chartis Specialty Insurance Co.Address 1650 Market Street
Philadelphia, PA 19103Contact Monte Badasarian

Telephone _____

Policy Number CPO61823904Expiration date 9/1/2012d. Transportation Mode ☐ Air ☐ Rail ☒ Highway ☐ Water ☐ Other - specify _____e. ☐ Hazardous Waste Transfer Facility: Storage Volume _____☐ Initial notification

The following items are required to be submitted with the initial notification for a transfer facility [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:

- ☐ Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of Section 403.721(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]
- ☐ Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.]
- ☐ A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.]
- ☐ A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]
- ☐ A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.]
- ☐ A map or maps of the transfer facility [Rule 62-730.171(3)(a)7., F.A.C.]
- ☐ Notification of changes in above items
- ☐ Annual update notification

B. Universal Waste (UW) Activities (Mark 'X' in all that apply) ("accumulated" means at any one time):

- ☐ Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more of any combination of UW accumulated
- ☐ Small Quantity Handler (SQH) = always less than 5,000 kg accumulated
- ☐ Mercury-containing devices LQH = 100 kg (220 lb) or more accumulated by for-hire handler
- ☐ Mercury-containing devices SQH = less than 100 kg accumulated by for-hire handler
- ☐ Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler
- ☐ Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler
- [Note: 4 lamps = 1 kg, 62-737.200(10)]
- ☐ Pharmaceuticals LQH = 5,000 kg or more of universal pharmaceutical waste (UPW) accumulated
- ☐ Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste accumulated
- ☐ Pharmaceuticals SQH = always less than 5,000 kg of UPW and always 1 kg or less of acutely hazardous UPW accumulated

(1) For those Managing	Generate/ Accumulate	Transport (see note in instructions)	Handle at Transfer Facility	(2) Enter your estimate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
c. Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
d. Mercury Containing Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
e. Mercury Containing Lamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

(3) Mercury Recovery and/or Reclamation Facility ☐ Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]
[Chapter 62-737, F.A.C.]

(4) Reverse Distributor of UW ☐ Pharmaceuticals ☐ Lamps ☐ Devices ☐

(5) Destination Facility for UW ☐ Note: for this activity, a facility must treat, dispose or recycle a UW. A permit is required for storage prior to recycling.

C. Used Oil Activities:**(1) Used Oil Transporter - indicate type(s) of activity(ies):**

- ☐ a. Transporter
- ☐ b. Transfer Facility

(2) ☐ Collection Center**(3) ☐ Used Oil Processor** (A permit is required for this activity.)**(4) ☐ Off-Specification Used Oil Burner****(5) ☐ Used Oil Fuel Marketer****(6) Used Oil Filter**

- ☐ a. Transporter
- ☐ b. Transfer Facility
- ☐ c. Processor
- ☐ d. End User

(7) Used Oil Transporters, Transfer Facilities, Collection Centers, Off-Specification Burners and Marketers must pay an annual \$100 registration fee. Used Oil Processors are exempt from this fee. If applicable, enclose a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection.

☐ A check is enclosed.

8) Specific Certification to be signed by all Used Oil Transporters

I certify as a Used Oil Transporter that the training program and financial responsibility required under Section 62-710.600, F.A.C., are in place, current and being adhered to. If any modifications have been made to the originally approved training program, they are explained in attachments to this registration form. Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of Liability Insurance, DEP form 62-710.901(4), F.A.C.

Signature of Authorized Person

Print Name of Authorized Person

(9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one):

- ☐ our mailing (business) address
- ☐ The site (facility) address

EPA ID No.

FLD980799381

D. Other State Regulated Waste Activities:☐ **Petroleum Contact Water (PCW) Handler** [Chapter 62-740, F.A.C.]

Note: A water facility permit may be required for this activity.

10. Waste Codes for Federally Regulated Hazardous Wastes: List the waste codes of the Federal hazardous wastes handled at your facility. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112).

Hazardous waste transporters list codes routinely or usually transported. Use an additional page if more spaces are needed.

1	D001	2	D008	3	D018	4	D039	5	D040	6	D042	7	
8		9		10		11		12		13		14	
15		16		17		18		19		20		21	
22		23		24		25		26		27		28	

11. Other Status Changes (Mark 'X' in all that apply):**A. Non-Handler of Regulated Waste at This Facility**

- ☐ (1) Business no longer generates, transports, treats, stores, or disposes of hazardous waste
- ☐ (2) Waste generated by business has been delisted.
- ☐ (3) Other (explain) _____

B. Facility Closed

- ☐ (1) Closed at this location and **moved or moving** to another - submit a new Form 8700-12FL for the new location if you will be handling regulated waste there.
- ☐ (2) Out of Business - Business closed on _____ (Date). Please provide a contact person, mailing address, and phone number where you can be reached after closing.

Contact _____ Phone _____

Address _____

City, State, Zip _____

☐ **C. Property Tax Default**☐ **D. Petition for Bankruptcy Protection**

12. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. If I have notified as a transfer facility, I am aware that transfer facilities must comply with the requirements of Rule 62-730.171, FAC, and Rule 62-730.182, FAC.

Signature of owner, operator, or an authorized representative

Print Name and Title

Date Signed
(mm-dd-yyyy)

Greg Dever, Office Director

08-31-2011

If the person who filled in this form is not the Facility Contact or Operator, please complete the information below:

(Name of person completing this form)

(Phone Number)

(E-mail Address)

13. Comments:

Shaw Environmental, Inc. and Shaw Environmental and Infrastructure, Inc. are not hazardous waste generators. This form is submitted for registration of Shaw's hazardous waste transporter services from facilities and project sites owned by others to licensed TSDFs owned and operated by others. No hazardous wastes are stored or transferred at Shaw facilities.

Shaw Environmental, Inc. FEID - 770589932

Shaw Environmental and Infrastructure, Inc. FEID - 753044680



CERTIFICATE OF LIABILITY INSURANCE

Page 1 of 2

DATE (MM/DD/YYYY)
08/31/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Willis of Pennsylvania, Inc. 26 Century Blvd. P. O. Box 305191 Nashville, TN 37230-5191	CONTACT NAME: PHONE (A/C. NO. EXT.): 877-945-7378 FAX (A/C. NO.): 888-467-2378 E-MAIL ADDRESS: certificates@willis.com INSURER(S) AFFORDING COVERAGE INSURER A: Chartis Specialty Insurance Company, USA INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Shaw Environmental & Infrastructure, Inc. Shaw Environmental, Inc. See Page 2 for List of Other Insureds 4171 Essen Lane Baton Rouge, LA 70809	NAIC # 26883-002

COVERAGES**CERTIFICATE NUMBER:** 16437632**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD'L INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/PROP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTIONS						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATU- TORY LIMITS <input type="checkbox"/> OTH- ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Contractors Pollution Liability Occurrence			CPO61823904	9/1/2011	9/1/2012	\$1,000,000 Each Claim \$1,000,000 Annual Aggregate

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach Acord 101, Additional Remarks Schedule, if more space is required)

Shaw Environmental, Inc.; Project: Florida Hazardous Waste Transporter Certificate of Approval

CERTIFICATE HOLDER**CANCELLATION**

Florida Dept. of Environmental Protection Bureau of Solid & Hazardous Waste 2600 Blair Stone Road Tallahassee, FL 32399-2400	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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Coll:3472717 Tpl:1318664 Cert:16437632 ©1988-2010 ACORD CORPORATION. All rights reserved.



ADDITIONAL REMARKS SCHEDULE

Page 2 of 2

AGENCY Willis of Pennsylvania, Inc.		NAMED INSURED Shaw Environmental & Infrastructure, Inc. Shaw Environmental, Inc. See Page 2 for List of Other Insureds 4171 Essen Lane Baton Rouge, LA 70809	
POLICY NUMBER CPO61823904			
CARRIER Chartis Specialty Insurance Company, USA	NAIC CODE 26883-002	EFFECTIVE DATE: 09/01/2011	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

Named Insureds:

The Shaw Group Inc.; Shaw International, Inc.; Stone & Webster, Inc.; Stone & Webster Construction, Inc.; B.F. Shaw, Inc.; Shaw Sunland Fabricators, Inc.; Shaw SSS Fabricators, Inc.; Shaw Maintenance, Inc.; Shaw Constructors, Inc.; Shaw NAPTech, Inc.; Stone & Webster Engineering NY, PC; Shaw Environmental, Inc.; Shaw Environmental & Infrastructure, Inc.; Shaw Coastal, Inc.; Shaw Beneco, Inc.; EMCON/OWT, Inc.; Shaw Infrastructure, Inc.; Stone & Webster Consultants, Limited; Stone & Webster Management Consultants, Inc.; Shaw Tulsa Fabricators, Inc.; Coastal Estuary Service, L.L.C.; Shaw Alloy Piping Products, Inc.; Shaw Canada, L.P.; Shaw Energy & Chemicals, Inc.; Shaw Facilities, Inc.; Shaw GBB, LLC; Coastal Planning & Engineering, Inc.; Shaw North Carolina, Inc.; Shaw Nuclear Services, Inc.; Shaw Power, Inc.; Shaw Fabrication & Manufacturing, Inc.

The Shaw Group Inc. and its majority owned subsidiaries are Named Insureds under the insurance policies listed on this Certificate. The above list is a representative list of the major subsidiaries of The Shaw Group Inc. and should not be considered complete.

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS					
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No Events		No Name History			
Detail by Entity Name					
<u>Foreign Profit Corporation</u>					
SHAW ENVIRONMENTAL, INC.					
<u>Filing Information</u>					
Document Number F02000002878					
FEI/EIN Number 770589932					
Date Filed 06/07/2002					
State LA					
Status ACTIVE					
<u>Principal Address</u>					
4171 EASEN LANE ATTN: DEBRA J. ROBERSON BATON ROUGE LA 70809 Changed 04/30/2004					
<u>Mailing Address</u>					
4171 EASEN LANE ATTN: DEBRA J. ROBERSON BATON ROUGE LA 70809 Changed 04/30/2004					
<u>Registered Agent Name & Address</u>					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 US					
<u>Officer/Director Detail</u>					
Name & Address					
Title AS WALL, ASHLEY C 4171 ESSEN LANE BATON ROUGE LA 70809					
Title PD BEVAN, GEORGE P 4171 ESSEN LANE BATON ROUGE LA 70809					
Title AS HAMILTON, REGINA H 4171 ESSEN LANE BATON ROUGE LA 70809					
Title CFOT DILLMAN, MICHAEL H 4171 ESSEN LANE BATON ROUGE LA 70809					
Title AT KINNISON, DAVID 4171 ESSEN LANE BATON ROUGE LA 70809					

Title VP

BULLINGTON, DAVID L
4171 ESSE LANE
BATON ROUGE LA 70809

Annual Reports**Report Year Filed Date**

2009	01/09/2009
2010	01/04/2010
2011	01/04/2011

Document Images

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06/07/2002 -- Foreign Profit	View image in PDF format

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No Events		No Name History		<input type="button" value="Submit"/>	
Detail by Entity Name					
Foreign Profit Corporation					
SHAW ENVIRONMENTAL & INFRASTRUCTURE, INC.					
Filing Information					
Document Number F04000007244					
FEI/EIN Number 753044680					
Date Filed 12/17/2004					
State LA					
Status ACTIVE					
Principal Address					
4171 ESSEN LANE ATTN: DEBRA ROBERSON BATON ROUGE LA 70809 Changed 01/26/2006					
Mailing Address					
4171 ESSEN LANE ATTN: DEBRA ROBERSON BATON ROUGE LA 70809 Changed 01/26/2006					
Registered Agent Name & Address					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 US					
Officer/Director Detail					
Name & Address					
Title CFOT					
DILLMAN, MICHAEL H 4171 ESSEN LANE BATON ROUGE LA 70809					
Title AS					
WALL, ASHLEY C 4171 ESSEN LANE BATON ROUGE LA 70809					
Title PD					
BEVAN, GEORGE P 4171 ESSEN LANE BATON ROUGE LA 70809					

Title AS

HAMILTON, REGINA H
4171 ESSEN LANE
BATON ROUGE LA 70809

Title AT

KINNISON, DAVID
4171 ESSEB LANE
BATON ROUGE LA 70809

Title VPT

BULLINGTON, DAVID L
4171 ESSEN LANE
BATON ROUGE LA 70809

Annual Reports**Report Year Filed Date**

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2010	01/04/2010
2011	01/04/2011

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