

SCC eFile

**2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

215505104

1.) CORPORATION NAME:

**SWISHER HYGIENE USA OPERATIONS, INC.**

DUE DATE: **1/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1885278**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**FL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4725 PIEDMONT ROW DRIVE  
SUITE 400

CITY/ST/ZIP: CHARLOTTE, NC 28210

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | WILLIAM M PIERCE                            |                                   |
| TITLE:          | PRESIDENT                                   |                                   |
| ADDRESS:        | 4725 PIEDMONT ROW DR<br>STE 400             |                                   |
| CITY/ST/ZIP/CO: | CHARLOTTE, NC 28210                         |                                   |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | WILLIAM T NANOVSKY                          |                                   |
| TITLE:          | TREASURER                                   |                                   |
| ADDRESS:        | 4725 PIEDMONT ROW DR<br>STE 400             |                                   |
| CITY/ST/ZIP/CO: | CHARLOTTE, NC 28210                         |                                   |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | GREGORY C MORRIS                            |                                   |
| TITLE:          | SECRETARY                                   |                                   |
| ADDRESS:        | 4725 PIEDMONT ROW DRIVE, SUITE 300          |                                   |
| CITY/ST/ZIP/CO: | CHARLOTTE, NC 28210                         |                                   |

|                 |                                    |  |
|-----------------|------------------------------------|--|
|                 | <input type="checkbox"/> OFFICER   | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | WILLIAM M PIERCE                   |  |
| TITLE:          | DIRECTOR                           |  |
| ADDRESS:        | 4725 PIEDMONT ROW DRIVE, SUITE 400 |  |
| CITY/ST/ZIP/CO: | CHARLOTTE, NC 28210                |  |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |   |          |
|---|---|----------|
| /s/ GREGORY C MORRIS                                | GREGORY C MORRIS,                             | 2/6/2015 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | SECRETARY<br>PRINTED NAME AND CORPORATE TITLE | DATE     |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.