

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90146 027 ***150.00

DOCUMENT # 292913

1. Entity Name
REFUSE SERVICES, INC.



Principal Place of Business
**1001 FANNIN SUITE 4000
HOUSTON TX 77002
US**

Mailing Address
**1001 FANNIN SUITE 4000
HOUSTON TX 77002
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1098850**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	HOPKINS, DAVID R	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	VPAT	<input type="checkbox"/> Delete
NAME	CARPENTER, DON	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	TVP	<input type="checkbox"/> Delete
NAME	JONES, RONALD	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	SVD	<input type="checkbox"/> Delete
NAME	STEINER, DAVID	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	AT	<input type="checkbox"/> Delete
NAME	SEWELL, FRANCES	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	VPAS	<input type="checkbox"/> Delete
NAME	SMITH, LINDA	
STREET ADDRESS	1001 FANNIN SUITE 4000	
CITY-ST-ZIP	HOUSTON TX 77002	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Frances B. Sewell

SIGNATURE: *Frances B. Sewell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/03 713-512-6200

Date Daytime Phone #