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Feb 21 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 440990 (0)  
1. Corporation Name  
EAST BAY SANITATION SERVICE, INC.



Principal Place of Business: 5006 U.S. HWY 41 SO, TAMPA FL 33619 US  
Mailing Address: ~~200 E LAS OLAS BLVD~~, ~~SUITE 1400~~, FORT LAUDERDALE FL 33301-2246

3. Date Incorporated or Qualified: 11/29/1973  
3a. Date of Last Report: 05/01/1996  
4. FEI Number: 59-1498255  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25  
2a. Mailing Address: 26 450 E. Las Olas Blvd., 27 Ste. 1200, 28 Ft. Lauderdale, FL, 29 Zip: 33301, 30 Country: USA

9. Name and Address of Current Registered Agent  
C T CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE: DP, NAME: HUDSON, HARRIS W., STREET ADDRESS: 200 E LAS OLAS BLVD, STE 1400, CITY-ST-ZIP: FT. LAUDERDALE FL 33301  
TITLE: V, NAME: WRIGHT, PETER, STREET ADDRESS: 200 E LAS OLAS BLVD, STE 1400, CITY-ST-ZIP: FT. LAUDERDALE FL 33301  
TITLE: S, NAME: HANDLEY, RICHARD L, STREET ADDRESS: 200 E LAS OLAS BLVD, STE 1400, CITY-ST-ZIP: FT. LAUDERDALE FL 33301

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE: Change, 1.2 NAME, 1.3 STREET ADDRESS: 450 E. Las Olas Blvd., Ste. 1200, 1.4 CITY-ST-ZIP: Ft. Lauderdale, FL 33301  
2.1 TITLE: Change, 2.2 NAME, 2.3 STREET ADDRESS: 450 E. Las Olas Blvd., Ste. 1200, 2.4 CITY-ST-ZIP: Ft. Lauderdale, FL 33301  
3.1 TITLE: Change, 3.2 NAME, 3.3 STREET ADDRESS: 450 E. Las Olas Blvd., Ste. 1200, 3.4 CITY-ST-ZIP: Ft. Lauderdale, FL 33301

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard L. Handley* Richard L. Handley  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-713-5600  
2/14/97  
Daytime Phone #

CR2E034 (9/96)