## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F97000000931

Entity Name: COMPACTOR RENTAL SYSTEMS OF DELAWARE, INC.

FILED Apr 11, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
18500 NORTH ALLIED WAY PHOENIX, AZ 85054					
Current Mailing Address:			New Mailing Address:		
18500 NORTH ALLIED WAY PHOENIX, AZ 85054					
FEI Number:	65-0723614	FEI Number Applied For ( ) FEI Num	nber Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New 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:					
		Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	HUDSON, HARRI	REET, 28TH FLOOR	Title: Name: Address: City-St-Zip:	PRES (X) Change ( ) Addition WALBRIDGE, KEVIN 832 LANGSDALE AVE. INDIANAPOLIS, IN 46202	
Title: Name: Address: City-St-Zip:	OCONNOR, JAM	REET, 28TH FLOOR	Title: Name: Address: City-St-Zip:	SEC (X) Change ( ) Addition WHITE, JO LYNN 18500 NORTH ALLIED WAY PHOENIX, AZ 85054	
Title: Name: Address: City-St-Zip:	BARCLAY, DAVID	REET, 28TH FLOOR	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition BENTER, TIM M 18500 NORTH ALLIED WAY PHOENIX, AZ 85054	
Title: Name: Address: City-St-Zip:	LANG, EDWARD	REET, 28TH FLOOR	Title: Name: Address: City-St-Zip:	TREA (X) Change ( ) Addition LANG, III, EDWARD A 18500 NORTH ALLIED WAY PHOENIX, AZ 85054	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	DIR ( ) Change (X) Addition SERIANNI, CHARLES F 18500 NORTH ALLIED WAY PHOENIX, AZ 85054	
Title: Name: Address: City-St-Zip:	()[	Delete	Title: Name: Address: City-St-Zip:	DIR ( ) Change (X) Addition SLAGER, DONALD W 18500 NORTH ALLIED WAY PHOENIX, AZ 85054	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANE LOUIS POA 04/11/2009