

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 Oct 15 1998 8:00am  
 Secretary of State

012222

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # L64522 (0)**  
 1. Corporation Name  
**OKEECHOBEE LANDFILL, INC.**



Principal Place of Business 10800 NE 128TH AVE OKEECHOBEE FL 34972 US	Mailing Address 1001 FANNIN SUITE 4000 HOUSTON TX 77002 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 04/11/1990	
4. FEI Number 25-1628636	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM  
 1200 SOUTH 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
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WILCOX, CHARLES A. 5400 LBJ FREEWAY, STE 300 TOWER ONE DALLAS TX <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DYS SANGALIS, GREGORY T. 5400 LBJ FREEWAY, STE 300, TOWER 1 DALLAS TX <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT DEFRATES, EARL E. 5400 LBJ FREEWAY, STE 300, TOWER 1 DALLAS TX <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SNYDER, BRUCE E. 5400 LBJ FREEWAY, STE 300 TOWER 1 DALLAS TX <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BLANKFIELD, BRYAN J. 5400 LBJ FREEWAY, STE 300, TOWER 1 DALLAS TX <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS STOCKLER, KAY F. 5400 LBJ FREEWAY, STE 300, TOWER 1 DALLAS TX <input checked="" type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

*See the attached*

14. 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 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: *GREGORY J. SANGALIS* 10/9/98 713/512-6200

CR2E034 (5/98)

OFFICERS	OFFICE	ADDRESS
Miller J. Mathews, Jr.	President	1001 Fannin, Suite 4000 Houston, Texas
Earl E. DeFrates	Executive Vice President Chief Financial Officer	1001 Fannin, Suite 4000 Houston, Texas
Gregory T. Sangalis	Senior Vice President Secretary Sole Director	1001 Fannin, Suite 4000 Houston, Texas
Bruce E. Snyder	Vice President Chief Accounting Officer Assistant Secretary	1001 Fannin, Suite 4000 Houston, Texas
Ronald H. Jones	Vice President Treasurer	1001 Fannin, Suite 4000 Houston, Texas
Bryan J. Blankfield	Vice President Assistant Secretary	1001 Fannin, Suite 4000 Houston, Texas
Jeffrey A. Draper	Vice President Assistant Treasurer	1001 Fannin, Suite 4000 Houston, Texas
Lee A. McCormick	Assistant Treasurer	