FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 28, 2002 8:00 am **DOCUMENT #** H26310 **Secretary of State** 1. Entity Name 02-28-2002 90044 027 \*\*\*150.00 WASTE MANAGEMENT OF LEON COUNTY, INC. Principal Place of Business Mailing Address 1001 FANNIN SUITE 4000 1001 FANNIN SUITE 4000 HOUSTON:TX 77002 HOUSTON TX 77002 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 36-3319565 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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. 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE Change NAME HOPKINS, DAVID R NAME SEWELL, FRANCES STREET ADDRESS STREET ADDRESS 1001 FANNIN SUITE 4000 1001 FANNIN SUITE 4000 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77002** HOUSTON TX 77002 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME HOLCOMB, GLENN R STREET ADDRESS STREET ADDRESS 1001 FANNIN SUITE 4000 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77002** ☐ Delete ☐ Chanoe ☐ Addition TITLE TITLE NAME NAME BAUGHMAN, STEVE STREET ADDRESS STREET ADDRESS 1001 FANNIN SUITE 4000 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77002** ☐ Change ☐ Addition TITLE ☐ Delete TITLE AS NAME KAPLAN, RONALD M MALJE STREET ADDRESS 1001 FANNIN SUITE 4000 STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77002** CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME JONES, RONALD H STREET ADDRESS STREET ADDRESS 1001 FANNIN, SUITE 4000 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77002** ☐ Change Addition TITLE ☐ Delete TITLE **VCFO** NAME NAME SNYDER, BRUCE E STREET ADDRESS STREET ADDRESS 1001 FANNIN, SUITE 4000 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77002**

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. GRANCES SEWELL