

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006661

FILED
Apr 18, 2011
Secretary of State

Entity Name: REPUBLIC SERVICES OF FLORIDA GP, INC.

Current Principal Place of Business:

18500 NORTH ALLIED WAY
PHOENIX, AZ 85054

New Principal Place of Business:

18500 NORTH ALLIED WAY
PHOENIX, AZ 85054 US

Current Mailing Address:

18500 NORTH ALLIED WAY
PHOENIX, AZ 85054

New Mailing Address:

18500 NORTH ALLIED WAY
PHOENIX, AZ 85054 US

FEI Number: 65-0963062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: BOUCHER, ROBERT PRES
Address: 16800 GREENSPOINT PARK DR., STE 225N
City-St-Zip: HOUSTON, TX 77060 US

Title: SEC
Name: SCHULER, EILEEN B SEC
Address: 18500 NORTH ALLIED WAY
City-St-Zip: PHOENIX, AZ 85054 US

Title: AS
Name: BENTER, TIM M AS
Address: 18500 NORTH ALLIED WAY
City-St-Zip: PHOENIX, AZ 85054 US

Title: TD
Name: LANG, III, EDWARD A TD
Address: 18500 NORTH ALLIED WAY
City-St-Zip: PHOENIX, AZ 85054 US

Title: DIR
Name: SERIANNI, CHARLES F DIR
Address: 18500 NORTH ALLIED WAY
City-St-Zip: PHOENIX, AZ 85054 US

Title: EVPD
Name: WALBRIDGE, KEVIN EVPD
Address: 18500 NORTH ALLIED WAY
City-St-Zip: PHOENIX, AZ 85054 US

I hereby 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 all other like empowered.

SIGNATURE: KELLY LETTMANN

POA

04/18/2011

Electronic Signature of Signing Officer or Director

Date