### 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G82885

Entity Name: ADVANCED DISPOSAL SERVICES CYPRESS ACRES LANDFILL,

INC.

**FILED** Mar 30, 2023 **Secretary of State** 2686002943CC

### **Current Principal Place of Business:**

800 CAPITOL STREET **SUITE 3000** 

HOUSTON, TX 77002

## **Current Mailing Address:**

800 CAPITOL STREET **SUITE 3000** HOUSTON, TX 77002 US

FEI Number: 59-2362841 Certificate of Status Desired: No

## Name and Address of Current 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:

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

PRESIDENT, DIRECTOR Title Title VP, SECRETARY, DIRECTOR

Name MYHAN, DAVID M. Name TIPPY, COURTNEY A. Address

800 CAPITOL STREET Address 800 CAPITOL STREET **SUITE 3000 SUITE 3000** 

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002

VΡ VΡ Title Title

Name CARROLL, THOMAS G. Name SHAW, BRANDON C. Address 800 CAPITOL STREET Address 800 CAPITOL STREET

**SUITE 3000 SUITE 3000** 

HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002 City-State-Zip:

Title VP, ASST. SECRETARY Title VP, ASST. TREASURER Name LAMBROS, JAMES F. Name LOCKETT, MARK A.

Address 800 CAPITOL STREET Address 800 CAPITOL STREET

**SUITE 3000 SUITE 3000** 

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002

Title VP, CFO, CONTROLLER Title VP, TREASURER Name CARROLL, JOHN A. Name NAGY, LESLIE K.

Address 800 CAPITOL STREET Address 800 CAPITOL STREET **SUITE 3000** 

**SUITE 3000** 

ASSISTANT TREASURER

HOUSTON TX 77002 **HOUSTON TX 77002** City-State-Zip: City-State-Zip:

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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: MARK A. LOCKETT VICE PRESIDENT & 03/30/2023

Electronic Signature of Signing Officer/Director Detail

# Officer/Director Detail Continued:

Title Title ASST. TREASURER Name WILSON, JAMES A. Name BENNETT, JEFF R. Address 800 CAPITOL STREET Address 800 CAPITOL STREET SUITE 3000 SUITE 3000

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002

Title ASST. SECRETARY Title ASSISTANT SECRETARY

Name DEANGELIS, CHRISTINA D. Name SILVA, LISA

Address 800 CAPITOL STREET Address 800 CAPITOL STREET **SUITE 3000** 

**SUITE 3000** 

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002