## 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64522

Entity Name: OKEECHOBEE LANDFILL, INC.

**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: 25-1628636 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:

Address

Address

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Apr 08, 2021

**Secretary of State** 

5028407959CC

Officer/Director Detail:

PRESIDENT, DIRECTOR Title Title VΡ

FARMER, DOMENICA Name MYHAN, DAVID M Name

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

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

Title VP, SECRETARY, DIRECTOR Title VP, CFO, CONTROLLER

TIPPY, COURTNEY A NAGY, LESLIE K Name Name

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

**SUITE 3000** 

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

Title VP, TREASURER Title VP, ASST. TREASURER REED, DAVID L Name Name LOCKETT, MARK A

800 CAPITOL STREET 800 CAPITOL STREET Address

**SUITE 3000 SUITE 3000** 

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

Title Title VP, ASST. SECRETARY

CARROLL, THOMAS G LAMBROS, JAMES F Name Name

Address 800 CAPITOL STREET Address 800 CAPITOL STREET

**SUITE 3000 SUITE 3000** 

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

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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.

04/08/2021 SIGNATURE: MARK A. LOCKETT VP & ASST. TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

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

Title ASST. SECRETARY Title ASST. SECRETARY

Name FOSTER, JANNE C Name KAPLAN, RONALD M

Address 800 CAPITOL STREET SUITE 3000

Address SUITE 3000

City-State-Zip:

HOUSTON TX 77002

Title ASST. SECRETARY

Name SILVA, LISA
Address 800 CAPITOL STREET

SUITE 3000

HOUSTON TX 77002

City-State-Zip: HOUSTON TX 77002

City-State-Zip: