2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 833892

Entity Name: BROWNING-FERRIS INDUSTRIES OF FLORIDA, INC.

FILED Apr 19, 2019 Secretary of State 0739697180CC

Current Principal Place of Business:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054

Current Mailing Address:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054 US

FEI Number: 74-1819238 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:

Title ASSISTANT SECRETARY Title SECRETARY

Name KORT, MYNDI M. Name SCHULER, EILEEN B.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP, TAX Title VP

Name FOCAZIO, LAWRENCE Name NICKERSON, JOHN

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP Title VP

NameULREICH-POWER, THOMASNameWILHOIT, ADRIENNE W.Address18500 NORTH ALLIED WAYAddress18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP Title VP

Name KORT, MYNDI M. Name BENTER, TIM M.

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

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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: EILEEN B. SCHULER SECRETARY

04/19/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP

Name SCHULER, EILEEN B.

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title DIRECTOR

Name GOEBEL, BRIAN A.

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title ASSISTANT SECRETARY

Name ULREICH-POWER, THOMAS

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title TREASURER

Name BOYD, CALVIN R.

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title PRESIDENT

Name BOYER, ROBERT B.

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title ASSISTANT SECRETARY

Name WILHOIT, ADRIENNE W.

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title ASSISTANT SECRETARY

Name NICKERSON, JOHN

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054