2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

336044 **DOCUMENT#**

1. Entity Name
TOWN AND COUNTRY REFUSE, INC.



FILED Feb 25, 2003 8:00 am Secretary of State 02-25-2003 90146 034 ***150.00

					ŀ	000 W1	ETRE						
Principal Place of Business 1001 FANNIN SUITE 4000 HOUSTON TX 77002 US			1001	Mailing Address 1001 FANNIN SUITE 4000 HOUSTON TX 77002 US									
2. Principal	Place of Busine	SS	3. Ma	3. Mailing Address							 		
Suite, Apt	t. #, etc.		Sui	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			City	City & State				4. FEI Number 59-1224889			—	pplied For	
Zip Country			Zip	Zip Country				5. Ce	ertificate of Status Desired		\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent								7. Na	ame and Address of New	Registered /	Agent		7
						Name							
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD						Street Ac	ddress (P.	O. Bo	x Number is Not Acceptab	ile)			\dashv
PLANTAT	10N FL 33324	,											1
										FL	Zip Coc		
8. The above the obliga	e named entity : itions of register	submits this statement red agent.	for the purp	ose of changing its	registered	office or	registered	d ager	nt, or both, in the State of F	florida. I am f	amiliar with,	and accept	
SIGNATURE		printed name of registered age	int and title if app	olicable. (NOTE	: Registered Ag	jent signatur	re required w	hen reins	stating)	DATE			
Afte	r May 1, 2003	FEE IS \$150.00 Fee will be \$550.00 Florida Department							Election Campaign F Trust Fund Contributi	· -		00 May Be d to Fees	
				-									
10.	P	OFFICERS AN	D DIRECTO	RS	11.	- 1		ADD	ITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11	╗.
TITLE	HOPKINS, [AVIID		☐ Delete	TITLE			•			Change	Addition	100
NAME STREET ADDRESS		N SUITE 4000			NAME			•					3
CITY-ST-ZIP	HOUSTON :				STREET A								000
TITLE	VPAT			☐ Delete	TITLE				10.00		Change	Addition	7
NAME	CARPENTER				NAME								1
STREET ADDRESS		N SUITE 4000			STREET A	DDRESS							
CITY-ST-ZIP	HOUSTON 1	X //UU2			CITY-ST-	ZIP							
TITLE ·	TVP			☐ Delete	TITLE						☐ Change	☐ Addition	1
NAME	JONES, ROI				NAME								
STREET ADDRESS		N SUITE 4000			STREET A	1							
CITY-ST-ZIP	HOUSTON 1	X //UUZ			CITY-ST-	ZIP							
TITLE	SVPD	MEC		Delete	TITLE		N A	. 0	STEINER		Change	☐ Addition	
NAME	STEINER, JO				NAME		DHA1-	D T	O TETNOR		•		
STREET ADDRESS CITY-ST-ZIP	HOUSTON 1	N SUITE 4000			STREET A								
		X 17002			CITY-ST-	ZIP							
TITLE	AT COME CO	ANOFO		☐ Delete	TITLE						Change	Addition	
NAME	SEWELL, FR				NAME	1			•				
STREET ADDRESS . CITY-ST-ZIP	1001 FANNII HOUSTON T				STREET AL								1
	VPAS	A 17002		<u> </u>	CITY-ST-	ZIP							
TITLE	SMITH, LIND	A 1		Delete	TITLE						Change	Addition	
NAME STREET ANDRESS	1001 FANNII				NAME								
STREET ADDRESS : CITY-ST-ZIP					STREET AL								
					CITY-ST-								
12. Thereby o	ertify that the in	formation supplied wit	th this filling	door not qualify for t	tha avamnt		dia Cast	440	0.07/0\/() Classic Oct.	1.1			1

receby 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

2/4/03