

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 02 1997 8:00am
Secretary of State

DOCUMENT # 474944 (6)

1. Corporation Name
WASTE RESOURCES OF TAMPA BAY, INC.



Principal Place of Business
C/O WASTE WASTE MANAGEMENT INC
3003 BUTTERFIELD RD
OAK BROOK IL 60521
US

Mailing Address
C/O WASTE WASTE MANAGEMENT INC
3003 BUTTERFIELD RD
OAK BROOK IL 60521-1107
US

3. Date Incorporated or Qualified
04/30/1975

3a. Date of Last Report
04/09/1996

4. FEI Number
59-1606435

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 3003 Butterfield Road
Suite, Apt. #, etc.
22
City & State
23 Oak Brook, IL
Zip
24 60521
Country
25 DuPage

2a. Mailing Address
26 3003 Butterfield Road
Suite, Apt. #, etc.
27
City & State
28 Oak Brook, IL
Zip
29 60521
Country
30 DuPage

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	JAMES E. O'CONNOR	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	STEVEN D. FERGUSON	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	BIER, BARBARA L	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE	T	<input type="checkbox"/> DELETE
NAME	STEVEN D. FERGUSON	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Assistant Secretary Jeffrey C. Everett
3.3 STREET ADDRESS	3003 Butterfield Road
3.4 CITY-ST-ZIP	Oak Brook, IL 60521
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby 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 annual report or supplemental annual 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; that I received or trust to be empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment to an address.

SIGNATURE:

Jeffrey C. Everett

1-16-97

CR2E034 (9/96)