## 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

DOCUMENT # 499662

(5)

BLAND DISPOSAL SERVICE, INC.

FILED Jan 29 1997 8:00am Secretary of State

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305 296.8297

Principal Place of Business  245 US1  BIG COPPITT KEY KEY WEST FL 33045-9431		Mailing Address			( TESSIL STRIC DEVIS DETIS CITTE SULE HELS SIBIL BIRNT BIRNT STRIL STRIL BIRNT 1981				
		58 PALMETTO DRIVE- P.O. BOX 2431 KEY WEST FL 33045-2431							
US					03/24/1976 0		, Date of Last Report 05/01/1996		
h	Place of Business	2a. Mailing Address			4. FEI Number		1	plied For	
21 24 S Suite, Apt		26 P.O. Box Suite, Apt. #, etc.	ar.	71	59-1662042		<del></del>	t Applicable	
22	#, OLC.	27			5. Certificate of Status Desired	□ <b>→</b>	<b>6./5</b> A	Additional guired	
City & Stat	le	City & State			6. Election Campaign Financing			May Be	
23 Bia C	ego: It Kay Fl	28 Yeu west	17 7	•	Trust Fund Contribution		Addød t		
ZiD 🐧	Country	Zip	Count	ry	8. This corporation has liability for i			199.032.	
24 330		29 33045	30	ــــــکـــــــــــــــــــــــــــــــ		Yes N			
	9. Name and Address of Curren	it Registered Agent		41 17	10. Name and Address of New Re	gistered Ager	<u>ıt</u>	<del></del>	
	ND, LESLIE		l e	1 Name					
	PALMETTO DRIVE		8	2 Street A	ddress (P.O. Box Number is Not Acceptab	le)			
	COPPITT KEY West FL 33040	•	8	3					
I INEI	THAT I P WOLLA					<del></del>	<del></del>		
			. 8	4 City		FL 85	Zip (	Jode	
office or r	registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or princed harm of registered agents.	of Florida. Such change was ations of, Section 607.0505, F	authorized l lorida Statut	by the corpo es.	orporation submits this statement for the paration's board of directors. I hereby acceptions when repetiting	I the appoint	nent as	registered	
12.	OFFICERS AN		13.	igeni signature re	ADDITIONS/CHANGES TO OFFIC		ECTOR	S IN 12	
TITLE	VD	DELETE	1.1 TITLE		Abbitiono/offitiace to office		Change	Addition	
NAME	BLAND, BETTY A.		1.2 NAM	E			-		
STREET ADDRESS	LOT 19, BIG COPPITT PK		1.3 \$1RE	ET ADDRESS					
CITY-ST-ZIP	KEY WEST FL 33040		1.4 CHY	- \$1 - 7/P					
TITLE	PD	☐ DELE1E	2 1 TITLE				Change	Addition	
NAME	BLAND, LESLIE		2.2 NAM	i					
STREET ADDRESS	53 PALMETTO DRIVE   KEY WEST FL			ET ADDRESS					
CITY-ST-ZIP TITLE	KEY WEST FL 33040	DELETE	2 4 CITY 3.1 TITLE	- ST - ZIP			Change	Addition	
NAME		[ ] pricit	3.1 IIIILE 3.2 NAM	í		L.J.	z-nanige	AUUIIUII	
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP				-SI-ZIP					
TITLE		DELETE	4.1 1ITLE				Change	Addition	
NAME			4. 2 NAM	IE.					
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CITY-ST-ZIP			4 4 CITY						
TITLE		☐ DELETE	51 THE				Change	Addition	
NAME			5.2 NAM						
STREET ADDRESS			1	ET ADDRESS					
CITY-ST-ZIP		DELETE	5 4 CHY				hanon	Addition	
TITLE		□ buttle	6.1 TITLE			السا	Change	Addition	
NAME			6.2 NAMI						
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP	by codify that the information supplies	d with this files does not ave	6.4 CHY		tod in Section 110 07/2Vi) Florida Statuta	I forther exect	it. that	th s	

4. 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 or the receiver or trustee 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 one an attachment with an address.

SIGNATURE:

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