

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # 668864 (2)

1. Corporation Name

KEENE ROAD LANDFILL, INC.



Principal Place of Business

**ATTN: BARBARA L. BIER
3003 BUTTERFIELD RD
OAK BROOK IL 60521
US**

Mailing Address

**ATTN: BARBARA L. BIER
3003 BUTTERFIELD RD
OAK BROOK IL 60521
US**

3. Date Incorporated or Qualified

05/05/1980

3a. Date of Last Report

04/20/1995

4. FEI Number

59-2044226

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

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

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)

(If 21b) Registered Agent Signature required when first filing

DATE

12. OFFICERS AND DIRECTORS

TITLE

PO

☐ DELETE

NAME

CONNOR, JAMES E.

STREET ADDRESS

3003 BUTTERFIELD RD

CITY- ST- ZIP

OAK BROOK IL

TITLE

VPD

☐ DELETE

NAME

FERGUSON, STEPHEN D

STREET ADDRESS

3003 BUTTERFIELD RD.

CITY- ST- ZIP

OAK BROOK IL

TITLE

SD

☒ DELETE

NAME

RAY III, JOHN J

STREET ADDRESS

3003 BUTTERFIELD RD.

CITY- ST- ZIP

OAK BROOK IL

TITLE

T

☐ DELETE

NAME

FERGUSON, STEPHEN D

STREET ADDRESS

3003 BUTTERFIELD RD

CITY- ST- ZIP

OAK BROOK IL

TITLE

AS

☐ DELETE

NAME

BIER, BARBARA L

STREET ADDRESS

3003 BUTTERFIELD RD.

CITY- ST- ZIP

OAK BROOK IL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

300001774029

-04/09/96--01092--034

*****200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE:

Barbara L. Bier **Barbara L. Bier, Assistant Secretary**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/96 **572-8841**

55-11-9-96

CR2E034 (12/95)