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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 676896

(4)

1. Corporation Name  
COUNTY SANITATION, INC.

Principal Place of Business  
15858 SOUTHWEST 4TH AVENUE  
DELRAY BEACH FL 33444-2271

Mailing Address  
757 N. ELDRIDGE  
TAX DEPT  
HOUSTON TX 77079-4435  
US

FILED  
Apr 30 1997 8:00am  
Secretary of State



2. Principal Place of Business  
21 1475 SW 4th Ave.

Suite, Apt. #, etc.

22 City & State  
23 Delray Beach, FL

24 Zip 33444 25 Country U.S.

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified  
07/22/1980

3a. Date of Last Report  
05/01/1996

4. FEI Number  
59-2053830

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 SOUTH 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 with nonstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE  
NAME CLARK, NEIL H. J  
STREET ADDRESS 8807 ROBERTS DR.  
CITY-ST-ZIP ATLANTA GA

TITLE VPAS ☐ DELETE  
NAME ANDERSON, THOMAS L.  
STREET ADDRESS 8807 ROBERTS DR.  
CITY-ST-ZIP ATLANTA GA

TITLE VPAS ☐ DELETE  
NAME FRIEDLANDER, SCOTT  
STREET ADDRESS 8807 ROBERTS DR.  
CITY-ST-ZIP ATLANTA GA

TITLE V ☐ DELETE  
NAME OLSON, WILLIAM H  
STREET ADDRESS 757 N. ELDRIDGE  
CITY-ST-ZIP HOUSTON TX 77079

TITLE VPDS ☐ DELETE  
NAME BURGER, GERALD K.  
STREET ADDRESS 757 N. ELDRIDGE  
CITY-ST-ZIP HOUSTON TX

TITLE AS ☐ DELETE  
NAME SCHULELR, EILEEN B.  
STREET ADDRESS 757 N. ELDRIDGE  
CITY-ST-ZIP HOUSTON TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☐ Change ☒ Addition  
1.2 NAME J. Frederick Snyder  
1.3 STREET ADDRESS 757 N. Eldridge  
1.4 CITY-ST-ZIP Houston, TX 77079

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

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 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

WILLIAM H. OLSON

APR 15 1997

281-870-8100

CR2E034 (9/96)