

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 843266 (8)

1. Corporation Name
WASTE MANAGEMENT, INC.



Principal Place of Business 3003 BUTTERFIELD ROAD OAK BROOK IL 60521 US	Mailing Address 3003 BUTTERFIELD RD OAK BROOK IL 60521 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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3. Date Incorporated or Qualified 05/14/1979	4. FEI Number 36-2660763	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	S	<input type="checkbox"/> DELETE
NAME	GETZ, HERBERT A	
STREET ADDRESS	3003 BUTTERFIELD RD	
CITY-ST-ZIP	OAK BROOK IL	
TITLE	BUNBROOK, DEAN L.	<input type="checkbox"/> DELETE
NAME	3003 BUTTERFIELD RD	
STREET ADDRESS	OAK BROOK IL	
CITY-ST-ZIP		
TITLE	AS	<input type="checkbox"/> DELETE
NAME	WITT, THOMAS A.	
STREET ADDRESS	3003 BUTTERFIELD RD	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE	SANFORD, JOHN D.	<input type="checkbox"/> DELETE
NAME	3003 BUTTERFIELD RD	
STREET ADDRESS	OAK BROOK IL	
CITY-ST-ZIP		
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	VP, GC, S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	CEO, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Robert S. Miller	
2.3 STREET ADDRESS	3003 Butterfield Road	
2.4 CITY-ST-ZIP	Oak Brook, Illinois 60523	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	H. Vaughn Hooks	
4.3 STREET ADDRESS	3003 Butterfield Road	
4.4 CITY-ST-ZIP	Oak Brook, Illinois 60523	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	H. Jesse Arnelle	
5.3 STREET ADDRESS	3003 Butterfield Road,	
5.4 CITY-ST-ZIP	Oak Brook, Illinois 60523	
6.1 TITLE	Pastora San Juan Cafferty	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	3003 Butterfield Road	
6.3 STREET ADDRESS	Oak Brook, Illinois 60523	
6.4 CITY-ST-ZIP		

14. I 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: *Thomas A. Witt* Thomas A. Witt 4/21/98 (630) 572-8800

CR2E034 (10/97)