## 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

## DOCUMENT #A9900001021

1. Entity Name

SOUTHERN WASTE SYSTEMS, LTD.



FILED Feb 22, 2007 08:00 A Secretary of State

Principal Place of Business

790 HILLBRATH DRIVE LANTANA, FL 33462 Mailing Address

790 HILLBRATH DRIVE LANTANA, FL 33462



02092007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0931538 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

GUSMANO, CHARLES 790 HILLBRATH DRIVE LANTANA, FL 33462

## DO NOT WRITE IN THIS SPACE

}		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable		
Signature, typed or printed name of registered agent and title if applicable DATE		
FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00		
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.		
12.	GENERAL PARTNER INFORMATION	
DOCUMENT /	P00000010352	
NAME	BCA HOLDING CORP.	
STREET ADDRESS	790 HILLBRATH DRIVE	
CITY-ST-ZIP	LANTANA, FL 33462	
DOCUMENT #		U00000644118
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information		

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF HORMON GENERAL PARTNER

2/20/07

(561) 582-6680

Daytime Phone &