

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000147

FILED
Jun 03, 2009
Secretary of State

Entity Name: VEOLIA ES SPECIAL SERVICES, INC.

Current Principal Place of Business:

3018 N HWY 146
BAYTOWN, TX 77520

New Principal Place of Business:

2525 SOUTH SHORE BLVD
SUITE 410
LEAGUE CITY, TX 77573

Current Mailing Address:

3018 N. HWY 146
BAYTOWN, TX 77520

New Mailing Address:

2525 SOUTH SHORE BLVD
SUITE 410
LEAGUE CITY, TX 77573

FEI Number: 39-1432114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: ROSE, MIKE
Address: 3018 N. HWY 146
City-St-Zip: BAYTOWN, TX 77520

Title: TD () Delete
Name: FARR, GEORGE K
Address: 700 E. BUTTERFIELD ROAD, #201
City-St-Zip: LOMBARD, IL 60148

Title: S () Delete
Name: SKOPP, FREDRIC
Address: 6090 N.W. 97TH AVE
City-St-Zip: MIAMI, FL 33178

Title: AT () Delete
Name: BRUCKERT, RAPHAEL B
Address: 125 S. 84TH STREET SUITE 200
City-St-Zip: MILWAUKEE, WI 53214

Title: S () Delete
Name: JENNINGS, KELLY
Address: 3018 N. HWY 146
City-St-Zip: BAYTOWN, TX 77520

Title: AT () Delete
Name: KARIUS, HENRY P
Address: 125 S 84TH ST #200
City-St-Zip: MILWAUKEE, WI 53214

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: ROSE, MIKE
Address: 2525 SOUTH SHORE BLVD
City-St-Zip: LEAGUE CITY, TX 77573

Title: TD (X) Change () Addition
Name: FARR, GEORGE K
Address: 200 E. RANDOLPH STREET, SUITE 7900
City-St-Zip: CHICAGO, IL 60601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE ROSE

PCEO

06/03/2009

Electronic Signature of Signing Officer or Director

Date