2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000000980

Entity Name: AMERICAN DEBRIS SERVICES, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9951 ATLANTIC BLVD., STE 177 9951 ATLANTIC BLVD., STE 463 JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225

Current Mailing Address: New Mailing Address:

9951 ATLANTIC BLVD., STE 177 9951 ATLANTIC BLVD., STE 463 JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225

FEI Number: 55-0747421 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WELCH, DELORES
9951 ATLANTIC BLVD., STE 177
9951 ATLANTIC BLVD., STE 463
JACKSONVILLE, FL 32225 US
JACKSONVILLE, FL 32225 US

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: 04/30/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: WELLS, JOHN C
Address: 1422 FERRIS STREET

City-St-Zip: MAYPORT, FL

City-St-Zip:

Title: VSD () Delete
Name: WELCH, DELORES S
Address: 1422 FERRIS STREET

MAYPORT, FL

Title: VSD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 WELLS, JOHN C

 Address:
 3625 MILLCREST DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32277

Title: PCD (X) Change () Addition

Name: WELCH, DELORES S
Address: 3625 MILLCREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DELORES S. WELCH PCD 04/30/2003