

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003773

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: VEOLIA ES SOLID WASTE LEASING CORP.

**Current Principal Place of Business:**

125 S. 84TH STREET, STE 200  
MILWAUKEE, WI 53214

**New Principal Place of Business:**

**Current Mailing Address:**

125 S. 84TH STREET, STE 200  
MILWAUKEE, WI 53214

**New Mailing Address:**

FEI Number: 39-2030141      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BURKE, RICHARD  
Address: 125 SOUTH 84TH ST., STE 200  
City-St-Zip: MILWAUKEE, WI 53214

Title: S ( ) Delete  
Name: SLATTERY, MICHAEL K  
Address: 125 SOUTH 84TH ST., STE 200  
City-St-Zip: MILWAUKEE, WI 53214

Title: TD ( ) Delete  
Name: FARR, GEORGE K  
Address: 700 EAST BUTTERFIELD, SUITE 201  
City-St-Zip: LOMBARD, IL 60148

Title: AT ( ) Delete  
Name: BRUCKERT, RAPHAEL B  
Address: 700 EAST BUTTERFIELD, SUITE 201  
City-St-Zip: LOMBARD, IL 60148

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

Title: VD ( ) Delete  
Name: ADIX, JEFFREY P  
Address: 125 SOUTH 84TH STREET, SUITE 200  
City-St-Zip: MILWAUKEE, WI 53214

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:

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: MICHAEL K. SLATTERY

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

SEC.

04/15/2008

\_\_\_\_\_ Date