

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000003367

FILED  
Sep 02, 2003  
Secretary of State

Entity Name: ADVANCED DISPOSAL SERVICES, INC.

## Current Principal Place of Business:

9995 GATE PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32241

## Current Mailing Address:

9995 GATE PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32241

## New Principal Place of Business:

9995 GATE PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32246

## New Mailing Address:

9995 GATE PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32246

FEI Number: 59-3683936

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

APPLEBY, CHARLES C  
9995 GATE PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32241

## Name and Address of New Registered Agent:

APPLEBY, CHARLES C  
9995 GATE PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32246

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:

09/02/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: CRAWFORD, FELIX A  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32241

Title: DPST ( ) Delete  
Name: APPLEBY, CHARLES C  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32241

Title: D ( ) Delete  
Name: HALL, WALTER JR.  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32241

Title: VP ( ) Delete  
Name: WILLIAMS, MARY M  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32241

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change ( ) Addition  
Name: CRAWFORD, FELIX A  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DPST (X) Change ( ) Addition  
Name: APPLEBY, CHARLES C  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DV (X) Change ( ) Addition  
Name: HALL, WALTER JR.  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32246

Title: V (X) Change ( ) Addition  
Name: O'BRIEN, MARY M  
Address: 9995 GATE PARKWAY #200  
City-St-Zip: JACKSONVILLE, FL 32246

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: CHARLES C. APPLEBY

DPST

09/02/2003

Electronic Signature of Signing Officer or Director

Date