

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000566

FILED
Apr 30, 2009
Secretary of State

Entity Name: S&S WASTE MANAGEMENT, INC.

Current Principal Place of Business:

2021 CORNELL PLACE
PORT ORANGE, FL 32128

New Principal Place of Business:

Current Mailing Address:

2021 CORNELL PL.
PORT ORANGE, FL 32128

New Mailing Address:

1869 E. SELTICE WAY #325
POST FALLS, ID 83854

FEI Number: 82-0535628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINLEY, STUART L
3021 CORNELL PLACE
PORT ORANGE, FL 32128 US

Name and Address of New Registered Agent:

FINLEY, STUART L
1869 E. SELTICE WAY #325
POST FALLS, FL 83854 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: FINLEY, STUART L
Address: 2021 CORNELL PLACE
City-St-Zip: PORT ORANGE, FL 32128

Title: CD () Delete
Name: FINLEY, STUART L
Address: 2021 CORNELL PLACE
City-St-Zip: PORT ORANGE, FL 32128

Title: VP () Delete
Name: STEFFENHAGEN, KEITH V
Address: 4422 MARBLE FRONT RD.
City-St-Zip: CALDWELL, ID 83605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: FINLEY, STUART L
Address: 1869 E. SELTICE WAY #325
City-St-Zip: POST FALLS, ID 83854

Title: CD (X) Change () Addition
Name: FINLEY, STUART L
Address: 1869 E. SELTICE WAY #325
City-St-Zip: POST FALLS, ID 83854

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: STUART FINLEY

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date