

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005096

FILED
Jan 14, 2009
Secretary of State

Entity Name: ADVANT - EDGE WASTE SOLUTIONS, INC.

Current Principal Place of Business:

927 RED TOAD ROAD
NORTH EAST, MD 21901

New Principal Place of Business:

Current Mailing Address:

927 RED TOAD ROAD
NORTH EAST, MD 21901

New Mailing Address:

FEI Number: 42-1554810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARNES, JOHN L
3876 SOUTH RIDGE CIRCLE
TITUSVILLE, FL 32796 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: C () Delete
Name: BARNES, JOHN L
Address: 3876 SOUTH RIDGE CIRCLE
City-St-Zip: TITUSVILLE, FL 32796

Title: VCS () Delete
Name: HOLLAND, DONALD
Address: 927 RED TOAD ROAD
City-St-Zip: NORTH EAST, MD 21901

Title: D () Delete
Name: JONES, THOMAS
Address: 3220 QUEEN PALM DRIVE
City-St-Zip: EDGEWATER, FL 32141

Title: DP (X) Delete
Name: OGBORNE, JACQUELINE
Address: 927 RED TOAD ROAD
City-St-Zip: NORTH EAST, MD 21901

Title: T (X) Delete
Name: HOLLAND, LAURIE
Address: 927 RED TOAD ROAD
City-St-Zip: NORTH EAST, MD 21901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BARNES, JOHN L
Address: 3876 SOUTH RIDGE CIRCLE
City-St-Zip: TITUSVILLE, FL 32796

Title: VP (X) Change () Addition
Name: STORY, DENNIS
Address: 927 RED TOAD ROAD
City-St-Zip: NORTH EAST, MD 21901

Title: PD (X) Change () Addition
Name: OGBORNE, JACQUELINE
Address: 302 PEDRICKTOWN ROAD
City-St-Zip: LOGAN TOWNSHIP, NJ 08085

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: JOHN L BARNES

CEO

01/14/2009

Electronic Signature of Signing Officer or Director

Date