## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

F26611

(6)

SEABOARD WASTE SYSTEMS, INC.

FILED Mar 30 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		. contro the main and that the state and the
ATTN: TERI		ATTN: TERI TRIMMER.		
	AS BLVD. STE 1200	450 E LAS OALS BLVD.		
I US	RDALE FL 33301	FORT LAUDERDALE FL 3	13301	DO NOT WRITE IN THIS SPACE
"		US		3. Date Incorporated or Qualified
9 Principal D	loan of Business	On Mailing Address		03/17/1981
	tace of Business E. 6th Street	2a. Mailing Address	th Stree	4. FEI Number Applied For
21 1(0 S, Suite, Apt.			14 011 E	
	Poor	Suite, Apt. #, etc.	م	5. Certificate of Status Desired  \$8.75 Additional
City & State	······································	27 2011 P100	<u> </u>	Fee Required
23 Fort	1		male.	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zin	Country	Zip	Country	
<b>24</b> ごろ33	301 25 US	— <b>フ</b> ラースト !	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No
	9. Name and Address of Current		301 1	10. Name and Address of New Registered Agent
CT CORPORATION 81 Name				
1200 S PINE ISLAND RD				
PLANTATION FL 33324			82 St	Street Address (P.O. Box Number is Not Acceptable)
	ANTAHOR I E 33324		83	
			"	
			<b>84</b> Ci	City 85 Zip Code
FL 10 245 COOK				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered				
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE				
12.	Signature, typed or printed name of registered agen OFFICERS AND		Registered Agent sign	ignature required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	HUDSON, HARRIS W			Here a constant of the constan
··· -	450 E LAS OLAS BLVD, STE	1200	1.2 NAME	ttudson, tarns W.  110 S.E. 6th Street, 20th Floor Fort Lauderdale, PL 33301
STREET ADDRESS	FORT LAUDERDALE FL	1200	1.3 STREET ADDR	RESS 110 S.E. GM STIZET, 20M FIDO
CITY-ST-ZIP TITLE	D D	DELETE	1.4 CITY - ST - ZIP	P POTT LAUGERAALE, PL 33301
	CRAWFORD, FELIX		2.1 TITLE	☐ Change ☐ Addition
NAME	218 MORGAN AVENUE		2.2 NAME	
STREET ADDRESS	JACKSONVILLE FL 32254		2.3 STREET ADDR	
CITY-ST-ZIP	AST AST	S AFLETE	2. 4 CITY - ST - ZIP	
TITLE	* - + -	DELETE	3.1 TITLE	AS/T Change Addition
NAME	PEDDY, COURTLAND	1000	3.2 NAME	Harrison, Alan B. 110 S.E. 6th Street, 20th Floor
STREET ADDRESS	450 E LAS OLAS BLVD, STE 1	1200	3.3 STREET ADDR	IRESS 110 S.E. BIN STREET, 2011 P1001
CITY - ST - ZIP	FORT LAUDERDALE FL	W/	3.4. CITY - ST - ZIP	
TITLE	VS DICHARD I	DELETE.	4.1 TITLE	VS Change X Addition
NAME	HANDLEY, RICHARD L	1000	4. 2 NAME	cole James O.
STREET ADDRESS	450 E LAS OLAS BLVD, STE 1	1200	4.3 STREET ADDR	
CITY-ST-ZIP	FORT LAUDERDALE FL		4.4 CITY - ST - ZIP	Fort Lauderdale, PL 33301
TITLE	V	DELETE .	5.1 TITLE	Change Addition
NAME	GUERIN, ROBERT		5.2 NAME	Craw Tordy KDONT
STREET ADDRESS	450 E LAS OLAS BLVD, STE 1	1200	5.3 STREET ADDRI	
CITY-ST-ZIP	FORT LAUDERDALE FL		5.4 CITY-ST-ZIP	Jacksonville, PL 32281
TITLE	γ	☐ DELETE	6.1 TITLE	Change Addition
NAME	CRAWFORD, ROBERT		6.2 NAME	
STREET ADDRESS	218 MORGAN AVENUE		6.3 STREET ADDRE	PRESS
CITY-ST-ZIP	JACKSONVILLE FL 32254		6.4 CITY-ST-ZIP	
14. I hereby c	ertify that the information supplied will	this filing does not qualify for	the exemption s	stated in Section 119 07(3)(i) Florida Statutes, I further certify that the information
indicated of officer or o	on this annual report or supplemental director at the corporation or the receiv	annual report is true <b>and a</b> ccu ver or trustee empower <b>ed</b> to e	irate and that mu	ny signature shall have the same legal effect as if made under oath; that I am an ort as required by Chapter 607, Florida Statutes; and that my name appears in
Block 12 or Block 13 In changed, or on an attachment with an address.				