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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 16 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

F95000004436 (0)

DOCUMENT #
1. Corporation Name WILLIAMS ENVIRONMENTAL SERVICES, INC. OF ALARAMA

| Principal Place of Business | | Mailing Address | | | |
|--|---|---|--------------------|--|--|
| 2075 WEST PARK PLACE | | C/O IVOR LONGO, ESQ. | | | |
| STONE MOUN | ITAIN GA 30087 | 2076 WEST PARK PLACE | | | DO NOT WRITE IN THIS SPACE |
| | | STONE MOUNTAIN GA 30087 | | | 3. Date Incorporated or Qualified |
| | | | | | 09/12/1995 |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number Applied For |
| 21 | | 26 | | | 63-0976973 Not Applicable |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired \$8.75 Additional |
| 22 | | 27 | | | Fee Required |
| City & State | | City & State | | | Election Campaign Financing \$5.00 May Be |
| 23 | | 28 Country | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Country | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No |
| 24 | | 25 29 30 me and Address of Current Registered Agent | | 10. Name and Address of New Registered Agent | |
| C T CORPORATION SYSTEM 81 Name | | | | | |
| | 10 SOUTH PINE ISLAND ROAD | | - | <u> </u> | |
| | INTATION FL 33324 | | • | 2 Street | et Address (P.O. Box Number is Not Acceptable) |
| | WITH 1011 1 L 000E4 | | 8 | 3 | |
| | | | . | 4 04 | loc 75- Onde |
| | | | • | 4 City | FL 85 Zip Code |
| 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 horeby accept the appointment as registered agent, it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | |
| SIGNATURE | | | | | |
| Signature, typed or printed name of registered agent and title if applicable (N | | | | gent signatur | ure required when reinstating) DATE |
| 12. | OFFICERS AND | DELETE DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITLE | TAYLOR, Z L | _ | | | Addition |
| A4-1-11/207-0-1-0-1-0-1 | | 1.21 | | ET ADDRESS | |
| STREET ADDRESS | STONE MOUNTAIN GA | | | | |
| CITY-ST-ZIP TITLE | S DELETE | | 2.1 TITL | -ST-ZIP | 30087 |
| NAME | BURGESS, BRETT A | | 22 NAM | | The state of the s |
| STREET ADDRESS | 2075 WEST PARK PLACE | | 2.3 STREET ADDRESS | | s |
| CITY-ST-ZIP STONE MOUNTAIN GA | | 1 | | - \$1 - ZIP | 30087 |
| TITLE | CD | DILETE 3.1 | | | Director Addition |
| NAME | WILLIAMS, VIRGIL R | | 3.2 NAM | E | 5116001 |
| STREET ADDRESS | 2076 WEST PARK PLACE | | 3 3 STRE | FT ADDRESS | 3 |
| CITY-ST-ZIP | STONE MOUNTAIN GA 3. | | 3.4. City | - ST - ZIP | 30087 |
| TITLE | VD □ DELETE 4.1 T | | 4.1 TITLE | | Director Addition |
| NAME | WILLIAMS JR., J M | | 4. 2 NAM | E | 2210001 |
| STREET ADDRESS | 2076 WEST PARK PLACE | | 4.3 STRE | ET ADDRESS | 3 |
| CITY-ST-ZIP | | | 4 4 CHY | - ST - ZIP | 30087 |
| TITLE | D | ☐ DELETE | 5 1 TITLE | | Addition . □ Addition |
| NAME | TAYLOR, Z. LOWELL | | 5.2 NAM | | |
| STREET ADDRESS | 2075 WEST PARK PLACE | | | E1 ADDRESS | 30087 |
| CITY-ST-ZIP | STONE MOUNTAIN GA | DELETE | 5.4 CITY | | |
| TITLE | | ☐ DELETE | 6 1 TITLE | | Change Addition |
| NAME | | | 6.2 NAM | | |
| STREET ADDRESS | | | | FT ADDRESS | ; |
| CiTY-ST-ZiP | ertify that the information supplied we | th this filing does not qualify f | or the exem | | sted in Section 119 07(3)(i) Florida Statutes. I further certify that the information |
| 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address. | | | | | |

2/6/98

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