

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G82885

FILED
Apr 11, 2012
Secretary of State

Entity Name: VEOLIA ES CYPRESS ACRES LANDFILL, INC.

Current Principal Place of Business:

125 SOUTH 84TH STREET
SUITE 200
MILWAUKEE, WI 53214 US

New Principal Place of Business:

Current Mailing Address:

125 SOUTH 84TH STREET
SUITE 200
MILWAUKEE, WI 53214 US

New Mailing Address:

FEI Number: 59-2362841 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PD
Name: LONG, JAMES
Address: 125 SOUTH 84TH STREET SUITE 200
City-St-Zip: MILWAUKEE, WI 53214

Title: VS
Name: SLATTERY, MICHAEL K
Address: 200 E. RANDOLPH ST., #7900
City-St-Zip: CHICAGO, IL 60601

Title: VP,T
Name: BRUCKERT, RAPHAEL B
Address: 125 S. 84TH STREET, SUITE 200
City-St-Zip: MILWAUKEE, WI 53214

Title: AT
Name: KARIUS, HENRY P
Address: 125 SOUTH 84TH STREET SUITE 200
City-St-Zip: MILWAUKEE, WI 53214

Title: AS
Name: GUNNELSON, MATTHEW C
Address: 125 S. 84TH STREET, SUITE 200
City-St-Zip: MILWAUKEE, WI 53214

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL K. SLATTERY

S

04/11/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date