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**May 02 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H26310 (3)
1. Corporation Name
WASTE MANAGEMENT OF LEON COUNTY, INC.



Principal Place of Business
**ATTN: BARBARA L. BIER
3003 BUTTERFIELD RD
OAK BROOK IL 60521
US**

Mailing Address
**ATTN: BARBARA L. BIER
3003 BUTTERFIELD RD
OAK BROOK IL 60521-1107
US**

3. Date Incorporated or Qualified **10/19/1984** 3a. Date of Last Report **04/09/1996**

2. Principal Place of Business
21 **3003 Butterfield Road**
Suite, Apt. #, etc.
22
City & State
23 **Oak Brook, IL**
Zip Country
24 **60521** 25 **DuPage**

2a. Mailing Address
26 **3003 Butterfield Road**
Suite, Apt #, etc.
27
City & State
28 **Oak Brook, IL**
Zip Country
29 **60521** 30 **DuPage**

4. FEI Number **36-3319565** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	O'CONNOR, JAMES E.	
STREET ADDRESS	3003 BUTTERFIELD RD.	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	STEVEN D. FERGUSON	
STREET ADDRESS	3003 BUTTERFIELD RD.	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	BIER, BARBARA L	
STREET ADDRESS	3003 BUTTERFIELD RD.	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE	T	<input type="checkbox"/> DELETE
NAME	STEVEN D. FERGUSON	
STREET ADDRESS	3003 BUTTERFIELD RD.	
CITY-ST-ZIP	OAK BROOK IL 60521	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	John Van Gessel	
1.3 STREET ADDRESS	3003 Butterfield Road	
1.4 CITY-ST-ZIP	Oak Brook, IL 60521	
2.1 TITLE	Assistant Secretary	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Jeffrey C. Everett	
2.3 STREET ADDRESS	3003 Butterfield Road	
2.4 CITY-ST-ZIP	Oak Brook, IL 60521	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 attachment with address.

SIGNATURE _____ **Jeffrey C. Everett** 1-17-97

CR2E034 (9/96)