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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **K60104**

1. Corporation Name

SERRING LANDFILL, INC.

## **FILED** Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90072 006 \*\*\*150.00

CEDIMA	G E/110/12E, 1710.				
Principal Plac	e of Business	Mailing Address			ais alaşı dibir dibil alalı alalı alalı
2075-A POWERLINE RD. 2075-A POWERLINE RD.					
POMPANO BEACH FL 33069 POMPANO BEACH FL 33069			BO NOT WINTE IN T	HIC CDACE	
US /		)		DO NOT WRITE IN T  3. Date Incorporated or Qualifed	TIS SPACE
		•		01/23/1989	
a Principal E	Place of Business	2a. Mailing Address	1	4. FEI Number	Applied For
21 955	Sheriff's Towark	121 P.O. Bis	1236	65-0096014	Not Applicable
Suite, Apt.	<del></del>	Suite, Apt. #, etc.			\$8.75 Additional
27				5. Certifcate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 3 5 0 7 7 7 7 28 3 7 0 7 7 9				Trust Fund Contribution	Added to Fees
Zip 2 S	370 Country	— ,5,5,7,1,1 —	V.S.N.	8. This corporation owes the current year	r Intangible ☐ Yes
24 3 3	23	29 3 5 7 1 30	V ( ) (   1 ) .	Personal Property Tax.  10. Name and Address of New Register	
9. Name and Address of Current Registered Agent 10				In Hame and Address of Men Vehicle	
ANGELL CORPORATE SERVICES, INC.					
			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City		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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE			····		_
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE: Regi	stered Agent signature require		(
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12 S  Change ☐ Addition
TITLE	PD ID	,—-	1.1 TITLE		
NAME	STERRITT,R.D. JR.	E E	1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS AN TX 75238		1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
TITLE	ROUSH,EDWARD	•	2.2 NAME		
NAME STREET ADDRESS	ACCEA LANGED DOAD		2.3 STREET ADDRESS		
	DALLAS TX 75238		2.4 CITY-ST-ZIP		,
CITY-ST-ZIP	President			resident	☐ Change Addition
NAME	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		32 NAME P	720 5. Oren Blod	
STREET ADDRESS		w.	3.3 STREET ADDRESS	720, 5.0 cean plu	
CITY-ST-ZIP	Manningan, FL	33462	3.4. CITY-ST-ZIP	renelapan, Fi 33462	
TITLE			4.1 TITLE		☐ Change ☐ Addition
NAME	]		4. 2 NAME		
STREET ADDRESS	5		4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE			5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		ļ
STREET ADDRESS	1	Į.	3.2 NAME		i
	3		5.3 STREET ADDRESS		Î
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		_
ì		☐ DELETE	5.3 STREET ADDRESS		☐ Change ☐ Addition

CITY-ST-ZIP 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Daytime Phone #