

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017488

FILED  
Jul 07, 2005  
Secretary of State

Entity Name: LIVE OAK C&D LANDFILL, LLC

## Current Principal Place of Business:

4030 WAKE FOREST ROAD, SUITE 300  
RALEIGH, NC 27609

## New Principal Place of Business:

6897 COUNTY ROAD 795  
LIVE OAK, FL 32060

## Current Mailing Address:

6897 COUNTY RD. 795  
LIVE OAK, FL 32060

## New Mailing Address:

8601 SIX FORKS RD.  
SUITE 400  
RALEIGH, NC 27615

FEI Number: 56-2274073      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

KELLY, KEN  
178 WEST RIVER ROAD  
PALATKA, FL 32177      US

## Name and Address of New Registered Agent:

DAVIS, ROGER  
178 WEST RIVER ROAD  
PALATKA, FL 32177      US

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: ROGER DAVIS

07/07/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete  
Name: KELLY, KEN  
Address: 178 WEST RIVER RD.  
City-St-Zip: PALATKA, FL 32177

Title: MGRM ( ) Delete  
Name: GOODE, STEVE  
Address: 4030 WALCE FOREST RD., STE. 300  
City-St-Zip: RALEIGH, NC 27609

Title: MGRM ( ) Delete  
Name: GLEASON, JIM  
Address: 4030 WALCE FOREST RD. STE. 300  
City-St-Zip: RALEIGH, NC 27609

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: GOODE, STEVE  
Address: 8601 SIX FORKS RD., SUITE 400  
City-St-Zip: RALEIGH, NC 27615

Title: MGRM (X) Change ( ) Addition  
Name: GLEESON, JAMES  
Address: 8601 SIX FORKS RD., SUITE 400  
City-St-Zip: RALEIGH, NC 27615

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES GLEESON

CFO

07/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date