

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L09000088175

**FILED**  
**Sep 17, 2012**  
**Secretary of State**

**Entity Name:** N. FT. MYERS SANITATION, LLC

**Current Principal Place of Business:**

16251 SLATER ROAD  
SUITE 4  
NORTH FORT MYERS, FL 33917 US

**New Principal Place of Business:**

**Current Mailing Address:**

16251 SLATER ROAD  
SUITE 4  
NORTH FORT MYERS, FL 33917 US

**New Mailing Address:**

**FEI Number:** 27-0919417      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURKE, PAULA  
2930 S.W. 1ST. PLACE  
CAPE CORAL, FL 33914 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** RIESER, DAVID J  
**Address:** 16251 SLATER RD. #4  
**City-St-Zip:** N. FT. MYERS, FL 33917 US

**Title:** MGRM  
**Name:** POSPISIL, BARNEY J JR  
**Address:** 1130 PATTERSON RD. APT. A  
**City-St-Zip:** CAPE CORAL, FL 33909 US

I hereby 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: DAVID J. REISER

MGRM

09/17/2012

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