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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # L19504

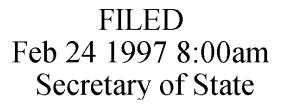
(4)

WASTE RECYCLERS OF NORTH FLORIDA, INC.

Princ	φal :	Place	Ol	Business
PΟ	BOX	600		

Mailing Address

P O BOX 600





NICEVILLE FL 32588-7600		NICEVILLE FL 32588-0600								
ł							3. Date Incorporated or Qualified 09/26/1989	3a. Date -		hode
2. Principal Place of Business 2a. Mailing Address			·			4. FEI Number		Ap	plied For	
		0 West	26				59-2978763		,	t Applicable
Suite, Apt. #, etc.			······	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional B Required	
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be
23 Freep	ort, F	L	28				Trust Fund Contribution		Added t	
Ζφ		Country	Zip		ountry	r ·	8. This corporation has liability for i			199.032,
24 32439		25 U.S.A.	[29]	30				X Yes ☐!		
			rent Registered Agent		81	Name	10. Name and Address of New Re	gistered Age	ent	
	SSER, D.				"	Name				
	EGLIN P				82	82 Street Address (P.O. Box Number is Not Acceptable)				
SHA	LIMAR FL	325/9			B3					
					84	City		FL [']	35 Zip (Code
11. Pursuant t	o the provis	sions of Sections 607.0	0502 and 607.1508, Florida Stat	tutes, the	abov	e-named con	poration submits this statement for the p		anging it	s registered
office or re agent. Lar	egisterco aç e familiar w	gent, or both, in the SI ith, and accept the of	ate of Florida. Such change war bligations of Section 607.0505, I	s authori Florida S	zed b tatute	y the corpora s.	ition's board of directors. I hereby accep	ot the appoin	tment as	registered
SIGNATURE	Strangen a trace	to profed name of registered	Forcet and test allow heating (A)	ru (- Rogie)	med An	ant pionaluro termi	ired when renstating)	DATE		<u></u>
12.	aduane da '		AND DIRECTORS	1		shi biginara a rego	ADDITIONS/CHANGES TO OFFIC		IRECTOR	S IN 12
THE	PD		DELETE		TITLE				Change	Addition
NAME	ROGERS	S, J. ANN		1.3	NAME					
STRULT ADDRESS	29 NEW	CASTLE CT.		1.3	STREE	ADDRESS				
Ca1 Y - S1 - ZIP	NICEVILI	le fl		1.4	CITY	S1 - ZIP				
THIEF	VSD		☐ DELETE	2.	TITLE				Change	Addition
NAME		S, BILLY W.		2.3	2 NAME					
STREET ADORESS		CASTLE CT.		2	STREE	T ADDRESS				
CHY-ST-7IP	NICEVILI	LE FL		. 2	4 CITY -	ST-ZIP				
THE			[] DELETE		TITLE			1_	Change .	Addition
NAM:					NAME					
STREET ADDRESS						ADDRESS				
CHY-ST-7/P			DELETE		1. CITY-	ST-ZIP		<u> </u>	Change	Addition
TITLE			ר"ו ועניבוב		1 IIILE			L.) Change	[Nonition
NAME				1	2 NAME	1				
STREET ADDRESS						ADDRESS				
C(1Y - S1 - 7IP *]16			DELETE		4 CITY- 1 TITLE	SI-2IP			Change	Addition
NAME			4		P NAME					
STREET ADDRESS				- 1		I ADDRESS				
City - \$1 - 2iP					4 CITY-					
TILE			DELETE		1 TITLE	VI 411		L	Change	Addition
NAMI					2 NAME			,	•	
STREET ADDRESS						T ADDRESS				
CHY - ST - Ze ²					4 CHY-					
	ov cert ly the	at the information sum	plied with this filing does not au				ed in Section 119.07(3)(i), Florida Statute	s. I further co	ertify that	the