2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 09, 2006
Secretary of State

DOCUMENT# M01000002328

Entity Name: ADVANCED DISPOSAL SERVICES NORTH FLORIDA, LLC

Current Principal Place of Business:

9995 GATE PARKWAY, N., SUITE 200
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

9995 GATE PARKWAY, N., SUITE 200
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 59-3759736 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

APPLEBY, CHARLES C
9995 GATE PARKWAY, N., SUITE 200
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

WODRICH, MICHAEL A
1301 RIVERPLACE BOULEVARD, SUITE 1500
JACKSONVILLE, FL 32207 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: MICHAEL A. WODRICH 02/09/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: APPLEBY, CHARLES C
Address: 9995 GATE PARKWAY, N., SUITE 200
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES:

Title: PST (X) Change ( ) Addition
Name: APPLEBY, CHARLES C
Address: 9995 GATE PARKWAY, N., SUITE 200
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CHARLES C. APPLEBY PST 02/09/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date