FILED 2005 LIMITED LIABILITY COMPANY Jan 12, 2005 08:00 AM **ANNUAL REPORT** DOCUMENT # M03000002409 **Secretary of State** 1. Entity Name INTEGRATED WASTE SERVICES, L.L.C. Principal Place of Business Mailing Address 2932 WEST MAIN STREET 105 HIGHCREST ROAD PRICHARD, AL 36610 PELHAM, AL 35124 01072005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 26-0062640 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CORPDIRECT AGENTS, INC. 103 N. MERIDIAN ST. TALLAHASSEE, FL 32301 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MONEY, JAMES W JR. 105 HIGHCREST ROAD PELHAM, ĀŪ 35124	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		000000178995 01/12/05-80051-019 55.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	17	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filling does not qualify for the exemption staled 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 signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

URE: SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING MANAGING PERSEN, OR AUTHORIZED REPRESENTATIVE

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205-621-58//

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