

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011512

FILED
Apr 14, 2009
Secretary of State

Entity Name: WASTE NOT WANT NOT, INC.

Current Principal Place of Business:

142 KINGSLEY AVE
ORANGE PARK, FL 32073

New Principal Place of Business:

2050 CARNES STREET
ORANGE PARK, FL 32073

Current Mailing Address:

P.O. BOX 119
ORANGE PARK, FL 32067

New Mailing Address:

FEI Number: 35-2244427 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, BARBARA
3330 CR 218
MIDDLEBURG, FL 32068 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STAUDT-KILLEA, SANDRA L
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

Title: T () Delete
Name: CONLIN, JUNE
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

Title: D () Delete
Name: RODRIGUEZ, DIONISIO
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

Title: D () Delete
Name: GARMUS, DAVID
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

Title: S () Delete
Name: RODRIGUEZ, BARBARA
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: FRALEY, JOAN
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

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

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

Title: D (X) Change () Addition
Name: BOWERS, GENE
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

Title: D () Change (X) Addition
Name: COULTER, PAUL
Address: PO BOX 119
City-St-Zip: ORANGE PARK, FL 32067

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA L. STAUDT-KILLEA

D

04/14/2009

Electronic Signature of Signing Officer or Director

Date