

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90659 044 ***150.00

0849014 SP

DOCUMENT # P00000000840

1. Entity Name
SUMTER RECYCLING AND SOLID WASTE DISPOSAL, INC.

Principal Place of Business
**375 COUNTY ROAD 489
 LAKE PANASOFFKEE FL 33538**

Mailing Address
**P OB OX 949
 LAKE PANASOFFKEE FL 33538**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

4. FEI Number **59-3619001**
 Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MESSER, RANDY
375 CR 489
LAKE PANASOFFKEE FL 33538

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, SCOTT A 1245 E NORVELL BRYANT HIGHWAY HERNANDO FL 34442 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COUCH, THEODORE J 1245 E NORVELL BRYANT HIGHWAY HERNANDO FL 34442 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRANGE, CHARLES E JR 1245 E NORVELL BRYANT HIGHWAY HERNANDO FL 34442 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALININ, THEODORE 1245 E NORVELL BRYANT HIGHWAY HERNANDO FL 34442 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MESSER, RANDY 375 CR 489 LAKE PANASOFFKEE FL 33538 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP STRANGE, CHARLES E. JR. 1245 E NORVELL BRYANT HIGHWAY HERNANDO, FL 34442 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S MALININ, THEODORE 360 ATLANTIC RD. KEY BISCAYNE, FL 33149 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICHARD L. HAIN 4239 S. PADDOCK PT. INVERNESS, FL 34450 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] **3-20-02 352-568-0999**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)