## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000065241

Title:

Name:

Address:

City-St-Zip:

FILED Jan 11, 2007 Secretary of State

Entity Nan	ne: OLD SEVIL	LE WASTE CONSULTING, IN	C.		
Current Principal Place of Business:			New Princi	New Principal Place of Business:	
4504 TWIN PENSACO	OAKS DR LA, FL 32506				
Current Mailing Address:			New Mailing Address:		
PO BOX 9 GULF BRE	67 EZE, FL 32562	0967			
FEI Number:	59-3657623	FEI Number Applied For ( )	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:	
BOYLES, B 9501 SCEN PENSACO		US			
The above in the State		bmits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR					
Election Carr		Signature of Registered Agen  Frust Fund Contribution ( ).	t	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP () D BOYLES, KATHLI 9501 SCENIC HW PENSACOLA, FL	VY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () D BOYLES, TODD 0 9501 SCENIC HV PENSACOLA, FL	VY	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition BOYLES, TODD J 3043 SKAGGS STREET GULF BREEZE, FL 32563	
Title: Name: Address: City-St-Zip:	P () C BOYLES, BRENT 9501 SCENIC HW PENSACOLA, FL	VY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CHRISTY HALL-CHRISTIAN ACC 01/11/2007

() Delete

BOYLES, TODD J

9501 SCENIC HWY

PENSACOLA, FL 32514

(X) Change ( ) Addition

BOYLES, TODD J

3043 SKAGGS STREET

GULF BREEZE, FL 32563