2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000086375

Entity Name: FLORIDA FILL HAULERS OF LAND O'LAKES, INC.

FILED Mar 06, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
	O O' LAKES B AKES, FL 34					
Current Mailing Address:			New Mailing Address:			
	O O' LAKES B AKES, FL 34					
FEI Number:	: 59-3758289	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Address of	New Registered Agent:	
REIBER, S 601 E TWI TAMPA, FI	GGS ST, SUIT					
	named entity of Florida.	submits this statement for the	purpose of changing i	ts registered	I office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P/D (REENE, ROBE 9237 HWY 230 UNADILLA, GA)	Title: Name: Address: City-St-Zip:	KEENE, ROE 9237 HWY 2		
Title: Name: Address: City-St-Zip:	KEENE, ROBE 10294 MAYBIF		Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	KEENE, DAVÌO 3722 MANNING		Title: Name: Address: City-St-Zip:	WATSON, Ro 17936 SR 52		
Title: Name:	T (HUGHES, CYN		Title: Name:		() Change () Addition	

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

City-St-Zip:

SIGNATURE: CYNTHIA I HUGHES TREA 03/06/2009

WEEKI WACHEE, FL 34614 US

City-St-Zip: