

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108811

FILED
Apr 07, 2005
Secretary of State

Entity Name: ATLANTIC ROLLOFF SERVICES, INC.

Current Principal Place of Business:

PO BOX 2164
PALM BEACH, FL 33480

New Principal Place of Business:

7171 SOUTHERN BOULEVARD
WEST PALM BEACH, FL 33413

Current Mailing Address:

PO BOX 2164
PALM BEACH, FL 33480

New Mailing Address:

7171 SOUTHERN BOULEVARD
WEST PALM BEACH, FL 33413

FEI Number: 90-0003191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNNE HAMPTON, PA
4778 127TH TRAIL NORTH
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

LYNNE HAMPTON
7171 SOUTHERN BOULEVARD
WEST PALM BEACH, FL 33413 US

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: LYNNE HAMPTON

04/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: HAMPTON, LYNNE
Address: PO BOX 2164
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: HAMPTON, LYNNE
Address: 7171 SOUTHERN BOULEVARD
City-St-Zip: WEST PALM BEACH, FL 33413

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: LYNNE HAMPTON

S

04/07/2005

Electronic Signature of Signing Officer or Director

Date