

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029580

FILED
Feb 28, 2005
Secretary of State

Entity Name: BROOKS WASTE MANAGEMENT INC.

Current Principal Place of Business:

1930 NE 3RD STREET
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

1930 NE 3RD STREET
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 91-2185673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, DAVID
1930 NE 3RD STREET
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

BROOKS, DAVID W
1930 NE 3RD STREET
CAPE CORAL, FL 33909 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: DAVID W BROOKS

02/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROOKS, DAVID
Address: 1930 NE 3RD STREET
City-St-Zip: CAPE CORAL, FL 33909

Title: VD () Delete
Name: BROOKS, MICHELENE
Address: 1930 NE 3RD STREET
City-St-Zip: CAPE CORAL, FL 33909

Title: STD () Delete
Name: PURVIS, JAMI
Address: 925 NE 4TH AVENUE
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JAMI PURVIS

STD

02/28/2005

Electronic Signature of Signing Officer or Director

Date