# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**
**Jan 31, 2008 08:00 AM**
**Secretary of State**

DOCUMENT # P05000008624

1. Entity Name

A DUMPSTER SERVICE OF MARTIN COUNTY, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 1599 NE AMY AVE<br>JENSEN BEACH FL 34957 | 1599 NE AMY AVE<br>JENSEN BEACH FL 34957 |

1599 NE Amy Ave

| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
|---|---|
| | 1599 NE Amy Ave |
| Suite, Apt. #, etc.<br>Jensen Beach FL. | Suite, Apt. #, etc. |
| City & State | City & State<br>Jensen Beach FL. |
| Zip / Country<br>34957 / Martin | Zip / Country<br>34957 / Martin |

1st MOORE CR2E034 (10/07)

4. FEI Number 20-2205119 ☐ Applied For ☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| A DUMPSTER SERVICE<br>1599 NE AMY AVE<br>JENSEN BEACH FL 34957 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when changing)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2008 Fee Will Be $550.00**
**Make Check Payable to Florida Department of State**

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

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>BERNER, JEFFREY R<br>1599 NE AMY AVE<br>JENSEN BEACH FL 34957 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>BERARD, JOSHUA<br>1599 NE AMY AVE<br>JENSEN BEACH FL 34957 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | U00000804528<br>02/05/08-80071-022 150.00<br>☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
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| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** _____ 1/26/08 772-370-8899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 772-263-9076