

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041443

Entity Name: C.L. NOONAN DISPOSAL, INC.

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

39 BEACH ROSE LN N
FALMOUTH, MA 02556 US

New Principal Place of Business:

16272 CUTTERS CT
FORT MYERS, FL 33908 US

Current Mailing Address:

16272 CUTTERS CT
FT MYERS, FL 33908

New Mailing Address:

FEI Number: 20-4650223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, JOHN
16272 CUTTERS CT
FT MYERS, FL 33908 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: NOONAN, CHRISTOPHER L
Address: 39 BEACH ROSE LANE
City-St-Zip: NORTH FALMOUTH, MA 02556 US

Title: D,T () Delete
Name: STEPHENS, JOHN
Address: 16272 CUTTERS COURT
City-St-Zip: FT. MYERS, FL 33908 US

Title: V,P () Delete
Name: NOONAN, PETER J
Address: 463 WILD HARBOR RD
City-St-Zip: N FALMOUTH, MA 02556

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 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.

SIGNATURE: JOHN STEPHENS

DT

01/26/2009

Electronic Signature of Signing Officer or Director

Date