2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000081493

Entity Name: COLLINS DISPOSAL, INC.

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

191 STATE ROAD 29 N 3160 COUNTY ROAD 830 FELDA, FL 33930 FELDA, FL 33930

Current Mailing Address: New Mailing Address:

P.O. BOX 310 FELDA, FL 33930 US

FEI Number: 20-5044372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

COLLINS, LINDA B COLLINS, LINDA B 3160 COÚNTY ROAD 830 191 STATE ROAD 29 N FELDA, FL 33930 FELDA, FL 33930

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: LINDA COLLINS 04/22/2008

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

FELDA, FL 33930 US

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition COLLINS, LARRY COLLINS JR, LARRY L Name: Name: 191 STATE ROAD 29 N 3160 COUNTY ROAD 830 Address: Address:

City-St-Zip: FELDA, FL 33930 US City-St-Zip: FELDA, FL 33930 US

Title: STD Title: () Change () Addition () Delete Name: COLLINS, LINDA Name: P.O. BOX 393 Address: Address:

Title: Title: VP. () Delete VΡ (X) Change () Addition

STARR, GARY Name: STARR, GARY Name: 114 IMMOKALEE DRIVE E 191 STATE ROAD 29 N Address: Address: City-St-Zip: IMMOKALEE, FL 34142 US City-St-Zip: FELDA, FL 33930 US

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: LARRY LEE COLLINS JR PD 04/22/2008