

# 2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P11000068725

**FILED**  
**Oct 07, 2014**  
**Secretary of State**

**Entity Name:** PROFESSIONAL DISPOSAL INC.

**Current Principal Place of Business:**

3761 TAMIAMI TRAIL E  
NAPLES, FL 34112

**New Principal Place of Business:**

6350 DAVIS BLVD  
1002  
NAPLES, FL 34104

**Current Mailing Address:**

3761 TAMIAMI TRAIL E  
NAPLES, FL 34112

**New Mailing Address:**

6350 DAVIS BLVD  
1002  
NAPLES, FL 34104

**FEI Number:** 45-2895473

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCDONNELL, MICHAEL R.N.  
5150 TAMIAMI TRAIL NORTH  
STE 203  
NAPLES, FL 34103 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: MICHAEL MCDONNELL R.N.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CAMMUSO, PAUL P  
Address: 6350 DAVIS BLVD  
City-St-Zip: NAPLES, FL 34104

Title: VP  
Name: CAMMUSO, PAUL M  
Address: 6350 DAVIS BLVD  
City-St-Zip: NAPLES, FL 34104

Title: SECR  
Name: CAMMUSO, DOMINICK P  
Address: 6350 DAVIS BLVD  
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: PAUL CAMMUSO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

10/07/2014

\_\_\_\_\_  
Date