

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90205 033 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P17385

1. Corporation Name
WMI URBAN SERVICES, INC.

Principal Place of Business
%WASTE MANAGEMENT, INC.
3003 BUTTERFIELD ROAD
OAK BROOK IL 60521

Mailing Address
%WASTE MANAGEMENT, INC.
3003 BUTTERFIELD ROAD
OAK BROOK IL 60521

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/24/1987

4. FEI Number
36-3524223

Applied For
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 1001 Fannin
Suite, Apt. 4000

26 1001 Fannin
Suite 4000 etc.

22 City & State
Houston, Texas

27 City & State
Houston, Texas

23 Zip
77002

Country
USA

28 Zip
77002

Country
USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME KOENIG, JAMES E
STREET ADDRESS 3001 BUTTERFIELD ROAD
CITY-ST-ZIP OAK BROOK IL

☒ DELETE

1.1 TITLE President
1.2 NAME Donald Chappel
1.3 STREET ADDRESS 1001 Fannin Suite 4000
1.4 CITY-ST-ZIP Houston, Texas 77002

☐ Change

☒ Addition

TITLE DVP
NAME GETZ, HERBERT A
STREET ADDRESS 3003 BUTTERFIELD ROAD
CITY-ST-ZIP OAK BROOK IL

☒ DELETE

2.1 TITLE SVP, Secretary & Sole Director
2.2 NAME Gregory T. Sangalis
2.3 STREET ADDRESS 1001 Fannin Suite 4000
2.4 CITY-ST-ZIP Houston, Texas 77002

☐ Change

☒ Addition

TITLE D
NAME HAU, THOMAS
STREET ADDRESS 3003 BUTTERFIELD RD
CITY-ST-ZIP OAK BROOK IL

☒ DELETE

3.1 TITLE VP & Asst. Secretary
3.2 NAME Bryan Blankfield
3.3 STREET ADDRESS 1001 Fannin Suite 4000
3.4 CITY-ST-ZIP Houston, Texas 77002

☐ Change

☒ Addition

TITLE AS
NAME COZZI, CARRIE L
STREET ADDRESS 3003 BUTTERFIELD ROAD
CITY-ST-ZIP OAK BROOK IL 60523

☒ DELETE

4.1 TITLE VP & Treasurer
4.2 NAME Ronald Jones
4.3 STREET ADDRESS 1001 Fannin Suite 4000
4.4 CITY-ST-ZIP Houston, Texas 77002

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE VP & Asst. Treasurer
5.2 NAME Jeffrey A. Draper
5.3 STREET ADDRESS 1001 Fannin Suite 4000
5.4 CITY-ST-ZIP Houston, Texas 77002

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE EVP & CFO
6.2 NAME Earl DeFrates
6.3 STREET ADDRESS 1001 Fannin Suite 4000
6.4 CITY-ST-ZIP Houston, Texas 77002

☐ Change

☒ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bryan J. Blankfield
Vice President & Assistant Secretary

4/6/1999

713/512-6200

Date

Daytime Phone #

CR2E034 (11/98)