



FILED
Jan 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000024240 1. Entity Name NORTH FLORIDA C & D LANDFILL, INC.			
Principal Place of Business 285 NW HERNANDO AVE LAKE CITY, FL 32055		Mailing Address 285 NW HERNANDO AVE LAKE CITY, FL 32055	
DO NOT WRITE IN THIS SPACE			
		01052007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 58-2391102 Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DARBY, HERBERT F 285 N HERNANDO AVE. LAKE CITY, FL 32055		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP RAMSAY, JOHN C 9209 RAMSAY ROAD GRAND BAY, AL 36541		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SMITH, TERRY D P.O. BOX 1173 (NA) LIVE OAK, FL 32060		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>John Ramsay</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		11/13/07 251 402-3677 <small>Date Daytime Phone #</small>	