

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000054363

1. Entity Name

ANDY'S WASTE HAULING SERVICE, INC.

R

FILED
Jul 05, 2000 8:00 am
Secretary of State

07-05-2000 90711 001 ***450.00

Principal Place of Business

4847 BUNYAN STREET
SARASOTA FL 34232

Mailing Address

1906 INDUSTRIAL PK DR
PLANT CITY FL 33567-1161

2. Principal Place of Business

3. Mailing Address

4800 North Federal Hwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite D-102

City & State

City & State

Boca Raton FL

Zip

Country

Zip

33431

Country

4. FEI Number

65-0846249

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAKER, TOM
1906 INDUSTRIAL PK DR
PLANT CITY FL 33566

Name

Ron Proctor

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

4800 N. Federal Hwy

Suite D-102

City

Boca Raton

FL

Zip Code

33431

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP
NAME SCHRANTZ, ANDREW C
STREET ADDRESS 4847 BUNYAN STREET
CITY-ST-ZIP SARASOTA FL 34232 ☒ Delete

TITLE President
NAME James A Waters
STREET ADDRESS 4800 N. Federal Hwy Suite D. 102
CITY-ST-ZIP Boca Raton FL 33431 ☐ Change ☒ Addition

TITLE VPF
NAME BAKER, TOM
STREET ADDRESS 845 MISSISSIPPI AVE
CITY-ST-ZIP LKND FL 33801 ☒ Delete

TITLE Chief Financial Officer
NAME Ronald Proctor
STREET ADDRESS 4800 N. Federal Hwy Suite D102
CITY-ST-ZIP Boca Raton FL 33431 ☐ Change ☒ Addition

TITLE P
NAME GILLHAM, GEORGE
STREET ADDRESS 1906 INDUSTRIAL PK DR
CITY-ST-ZIP PLANT CITY FL 33566 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPS
NAME BERTLEY, JASON
STREET ADDRESS 1906 INDUSTRIAL PK DR
CITY-ST-ZIP PLANT CITY FL 33566 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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 11 or Block 12 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

6/22/00

813 248-3802

Date

Daytime Phone #

FORM 700-1-00