2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000063371

Entity Name: SUN STATE SANITATION, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3401 NORTHWEST 34TH STREET

SUITE 3

GAINESVILLE, FL 32605

Current Mailing Address: New Mailing Address:

3401 NORTHWEST 34TH STREET SUITE 3 GAINESVILLE, FL 32605

FEI Number: 59-3587570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HARPE, C E III
7505 NW 131ST ST
GAINESVILLE, FL 32653 US
HARPE, C E III
529 TURKEY CREEK
ALACHUA, FL 32615 US

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: CLAUDE EVERETT HARPE, III 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PT (X) Change () Addition

 Name:
 HARPE, CLAUDE E III
 Name:
 HARPE, CLAUDE E III

 Address:
 7505 NW 131ST ST
 Address:
 529 TURKEY CREEK

 City-St-Zip:
 GAINESVILLE, FL 32653
 City-St-Zip:
 ALACHUA, FL 32615

Title: S () Delete Title: S (X) Change () Addition
Name: HARPE DANA
Name: HARPE DANA

 Name:
 HARPE, DANA
 Name:
 HARPE, DANA

 Address:
 7505 NW 131ST ST
 Address:
 529 TURKEY CREEK

 City-St-Zip:
 GAINESVILLE, FL 32653
 City-St-Zip:
 ALACHUA, FL 32615

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

 Name:
 Name:
 HARPE, CLAUDE E JR.

 Address:
 Address:
 7505 NW 131ST ST

 City-St-Zip:
 City-St-Zip:
 GAINESVILLE, FL 32653

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CLAUDE EVERETT HARPE, III P 04/29/2005