

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000063371

FILED
Jan 16, 2006
Secretary of State

Entity Name: SUN STATE SANITATION, INC.

Current Principal Place of Business:

3401 NORTHWEST 34TH STREET
SUITE 3
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

3401 NORTHWEST 34TH STREET
SUITE 3
GAINESVILLE, FL 32605

New Mailing Address:

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

Name and Address of Current Registered Agent:

HARPE, C E III
529 TURKEY CREEK
ALACHUA, FL 32615 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HARPE, CLAUDE E III
Address: 529 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

Title: S () Delete
Name: HARPE, DANA
Address: 529 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

Title: VP (X) Delete
Name: HARPE, CLAUDE E JR.
Address: 7505 NW 131ST ST
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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

PT

01/16/2006

Electronic Signature of Signing Officer or Director

_____ Date