

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000037644

**Entity Name:** WASTE PRO DEFUNIAK SPRINGS, LLC**Current Principal Place of Business:**2101 W SR 434  
3RD FLOOR  
LONGWOOD, FL 32779-5053**Current Mailing Address:**2101 W SR 434  
3RD FLOOR  
LONGWOOD, FL 32779-5053 US**FEI Number:** 45-1161500**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VELEZ, MALENIE  
2101 W SR 434 SUITE 315  
LONGWOOD, FL 32779-5053 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:** MALENIE VELEZ

03/03/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                            |                 |                         |
|-----------------|----------------------------|-----------------|-------------------------|
| Title           | CHAIRMAN                   | Title           | CFO                     |
| Name            | JENNINGS, JOHN J           | Name            | SABINA, CORT            |
| Address         | 2101 W SR 434<br>3RD FLOOR | Address         | 2101 E SR 434<br>3RD FL |
| City-State-Zip: | LONGWOOD FL 32779          | City-State-Zip: | LONGWOOD FL 32779       |
| Title           | CEO, PRESIDENT, SECRETARY  | Title           | COO                     |
| Name            | JENNINGS, SEAN MICHAEL     | Name            | BANASIAK, KEITH         |
| Address         | 2101 W SR 434<br>3RD FLOOR | Address         | 2101 W SR 434, 3RD FL   |
| City-State-Zip: | LONGWOOD FL 32779-5053     | City-State-Zip: | LONGWOOD FL 32779       |

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CORT SABINA

CFO

03/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date