

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003773

FILED
Apr 09, 2015
Secretary of State
CC4754584814

Entity Name: ADVANCED DISPOSAL SERVICES SOLID WASTE LEASING CORP.

Current Principal Place of Business:

90 FORT WADE RD
PONTE VEDRA, FL 32081

Current Mailing Address:

90 FORT WADE RD
PONTE VEDRA, FL 32081 US

FEI Number: 39-2030141

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CEO/DIRECTOR	Title	CFO, TREASURER/DIRECTOR
Name	BURKE , RICHARD	Name	CARN, STEVEN R.
Address	90 FORT WADE RD	Address	90 FORT WADE RD
City-State-Zip:	PONTE VEDRA FL 32081	City-State-Zip:	PONTE VEDRA FL 32081

Title	SECRETARY	Title	ASSISTANT SECRETARY
Name	SLATTERY, MICHAEL K.	Name	MILLS, CHRISTIAN B.
Address	90 FORT WADE RD	Address	90 FORT WADE RD
City-State-Zip:	PONTE VEDRA FL 32081	City-State-Zip:	PONTE VEDRA FL 32081

Title	DIRECTOR	Title	DIRECTOR
Name	APPLEBY, CHARLES C.	Name	BEALL, CHRISTOPHER
Address	90 FORT WADE RD	Address	90 FORT WADE RD
City-State-Zip:	PONTE VEDRA FL 32081	City-State-Zip:	PONTE VEDRA FL 32081

Title	DIRECTOR	Title	DIRECTOR
Name	MILLER, JOHN	Name	RINKLIN, MATTHEW
Address	90 FORT WADE RD	Address	90 FORT WADE RD
City-State-Zip:	PONTE VEDRA FL 32081	City-State-Zip:	PONTE VEDRA FL 32081

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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 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 all other like empowered.

SIGNATURE: CHRISTIAN B. MILLS

ASSISTANT SECRETARY 04/09/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BUDENBENDER, BRET
Address 90 FORT WADE RD
City-State-Zip: PONTE VEDRA FL 32081

Title DIRECTOR
Name PARKER, JARED
Address 90 FORT WADE RD
City-State-Zip: PONTE VEDRA FL 32081

Title DIRECTOR
Name QUINTELLA FILHO, WILSON
Address 90 FORT WADE RD
City-State-Zip: PONTE VEDRA FL 32081