

1.) CORPORATION NAME:

Republic Services, Inc.

DUE DATE: **10/31/2011**

SCC ID NO: **F1486804**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	750,000,000
PREFER	50,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 18500 NORTH ALLIED WAY

CITY/ST/ZIP: PHOENIX, AZ 85054-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JOHN W CROGHAN
TITLE: DIRECTOR
ADDRESS: C/O RAIL-SPLITTER CAPITAL MGMT, LLC
20 NORTH WACKER DRIVE #4120
CITY/ST/ZIP/CO: CHICAGO, IL 60606-

OFFICER DIRECTOR

NAME: JAMES W CROWNOVER
TITLE: CHAIRMAN
ADDRESS: TWO HOUSTON CENTER 909 FANNIN
SUITE #3675
CITY/ST/ZIP/CO: HOUSTON, TX 77010-

OFFICER DIRECTOR

NAME: WILLIAM J FLYNN
TITLE: DIRECTOR
ADDRESS: C/O ATLAS AIR, INC.
2000 WESTCHESTER AVENUE
CITY/ST/ZIP/CO: PURCHASE, NY 10577-

OFFICER DIRECTOR

NAME: MICHAEL LARSON
TITLE: DIRECTOR
ADDRESS: C/O CASCADE INVESTMENTS LLC
2365 CARILLON POINT
CITY/ST/ZIP/CO: KIRKLAND, WA 98033-

OFFICER DIRECTOR

NAME: NOLAN LEHMANN
TITLE: DIRECTOR
ADDRESS: C/O REPUBLIC SERVICES, INC.
18500 NORTH ALLIED WAY
CITY/ST/ZIP/CO: PHOENIX, AZ 85054-

OFFICER DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	W. LEE NUTTER DIRECTOR C/O REPUBLIC SERVICES, INC. 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAMON A RODRIGUEZ DIRECTOR C/O REPUBLIC SERVICES, INC. 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONALD W SLAGER PRES/CEO 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALLAN C SORENSEN DIRECTOR C/O REPUBLIC SERVICES, INC. 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN M TRANI DIRECTOR C/O JOHN M. TRANI, LLC 30 STANFORD DRIVE FARMINGTON, CT 06032-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL W WICKHAM DIRECTOR C/O REPUBLIC SERVICES, INC. 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOD C HOLMES EVP/CFO 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL P RISSMAN EVP/GC/SEC 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JERRY S CLARK SVP/Controller 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD A LANG III SVP/Treasurer 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES F SERIANNI SVP/CAO 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIM M BENTER VP/ASST SEC 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	W. T. EGGLESTON, JR. VP/ASST SEC 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDREW J SWEET VP/ASST SEC 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE FOCAZIO VP, TAX 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EILEEN B SCHULER ASST SECRETARY 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARSHA A LACY ASST TREASURER 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN A BALES EVP/Busines Dev 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CATHARINE D ELLINGSEN SVP/HR 18500 NORTH ALLIED WAY PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: WILLIAM G HALNON TITLE: SVP/CIO ADDRESS: 18500 NORTH ALLIED WAY CITY/ST/ZIP/CO: PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: JEFFREY A HUGHES TITLE: EVP/HR ADDRESS: 18500 NORTH ALLIED WAY CITY/ST/ZIP/CO: PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: KEVIN WALBRIDGE TITLE: EVP-Operations ADDRESS: 18500 NORTH ALLIED WAY CITY/ST/ZIP/CO: PHOENIX, AZ 85054-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ EILEEN B SCHULER _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	EILEEN B SCHULER, ASST SECRETARY _____ PRINTED NAME AND CORPORATE TITLE	9/26/2011 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		