DRAFT

COMMERCIAL COLLECTION SERVICE FRANCHISE APPLICATION CHECK-LIST

Applicant:	DisposAll LLC	Date:	10.10.25					
Status	Brief Description of Applic	ation Requirements						
`⊠ Met; 1.	Identity of the applicant, to include its principals, partners, and management. Section 4-1 C. (2)(a)							
Met; 2. ☐ Not Met	Evidence the entity is authorized to do business standing with the Department of State. Section		ida and in good					
™ Met; 3.	Information regarding the experience and qualification personnel with regard to Solid Waste collection.							
☑ Met; 4.	Information about the applicant's (including its print involvement as a subject or as a part in any litigate enforcement cases. Section 4-1 C. (2)(c) MUS	ation, criminal proceed						
✓ Met; 5.	List of all vehicles, equipment and other physical size, type and VIN] the applicant will use to colle providing Commercial Collection service within F	ct and transport Solid	Waste when					
✓ Met; 6.	List identifying the frequency of Commercial Coll customers with the identification number, size, cart, roll-off Container and compactor that the ap Solid Waste within the County. Section 4-1 C. (2)	apacity, and type of e	ach dumpster, roll					
✓ Met; 7.	Applicant's acknowledgment and consent the Coapplicant's vehicles, Containers, compactors and 4-1 C. (2)(f)							
☐ Met; 8.	Original Certificates of Insurance evidencing curr (NLT \$2M per occurrence) and State statutory w Section 4-1 C. (2)(g) Certificate Holder: Polk (State of Florida. 330 W Church St, Rm 150 Ba	orkers' comp. coverage County, a political se	ge (or waiver).					
☑ Met; 9.	Evidence the applicant has obtained all permits a ordinance to provide Commercial Collection Service)(h)							
☐ Met 10.	Delivery of Sworn affidavit confirming: (i) no uns applicant; (ii) no liens of record filed by the IRS o (iii) applicant will comply with all Ord. requirement C. (2)(i) MUST BE NOTARIZED	r State against the ap	plicant;					
☐ Met; 11.	Delivery of written indemnity of County from any applicant, its employees, subcontractors, agents, the terms of the franchise or the Ordinance. Sec NOTARIZED	, failure to perform in	compliance with					
☑ Met 12.	Delivery of applicable Commercial Franchise app	olication fee. Section	4-1 C. (5)					



DisposAll, Inc 3941 Bryn Mawr Street Orlando, Florida 32808

September 29th, 2025

DisposAll, Inc.

President:

Eugene Calabrese

Vice President:

Paula Calabrese

General Manager:

Eddie Chiari

Accounting:

Sherri De Lima

About Our Company

DisposAll is your local, family owned and operated, trash and recycling solution. In 1971 DisposAll opened its doors with the Mission Statement to provide: EXCELLENT customer service for a FAIR price, while giving a GOOD rate of return on investments and BEST living to our employees and their families.

In keeping with that same philosophy today DisposAll still treats its customers and employees like part of the family. Stop by any of our locations to see our 10 year wall. Growing each day with our veteran employees that have been part of the DisposAll Family for over 10 years.

DisposAll and its sister companies offer you easy one stop shopping for all your waste and recycling needs. Offering solutions for Commercial, Residential, Construction, Portable toilet services, Document Destruction, Recycling Programs, and Medical Waste Disposal. Give us a call today and see what the DisposAll family is all about.

Always at your disposal

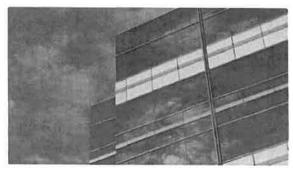
For over 50 years, DisposAll's customers have come to depend on our reliable, efficient and safe removal of waste and recyclable items.

We are your one-stop shop for all your disposal needs from temporary to long term.

Residential

DisposAll offers residential services to many local communities across Central and South Florida. DisposAll will provide consulting services and information for your community.

Our Services



Commercial

DisposAll Commercial Service handles all types of business from retail to restaurant, from industrial facilities to office building large or small and from strip mall to shopping malls.



Construction

Whether you are building up, taking down or remodeling, DisposAll offers a variety of dumpster container sizes to meet your needs no matter the construction project size.



Home

About

Services

Our Customers

Proposal Request

Pay Online

More

Browse
OUR CUSTOMERS







CROWN MOTORS









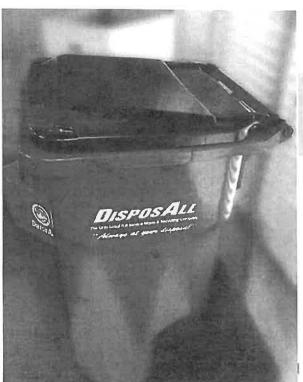
Residential Services:











Commercial Services:









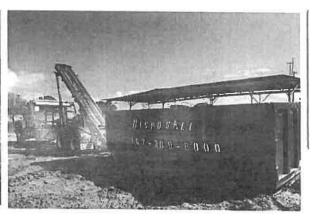




Construction Services:









Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Profit Corporation DISPOSALL, INC.

Filing Information

Document Number

P03000000705

FEI/EIN Number

90-0055585

Date Filed

01/02/2003

State

FL

Status

ACTIVE

Last Event

REINSTATEMENT

Event Date Filed

09/30/2023

Principal Address

3941 BRYN MAWR STREET

ORLANDO, FL 32810

Changed: 03/29/2011

Mailing Address

PO BOX 161417

ALTAMONTE SPRINGS, FL 32716

Changed: 10/14/2020

Registered Agent Name & Address

CALABRESE, PAULA

3941 BRYN MAWR STREET

ORLANDO, FL 32810

Name Changed: 10/08/2015

Address Changed: 10/14/2020

Officer/Director Detail
Name & Address

Title PD

Calabrese, Eugene PO BOX 161417

ALTAMONTE SPRINGS, FL 32716

Title VPD

CALABRESE, PAULA PO BOX 161417 ALTAMONTE SPRINGS, FL 32716

Annual Reports

 Report Year
 Filed Date

 2023
 09/30/2023

 2024
 05/01/2024

 2025
 04/30/2025

Document Images

04/30/2025 - ANNUAL REPORT	View image in PDF format
05/01/2024 ANNUAL REPORT	View image in PDF format
09/30/2023 - REINSTATEMENT	View image in PDF format
05/02/2022 ANNUAL REPORT	View image in PDF format
05/01/2021 ANNUAL REPORT	View image in PDF format
10/14/2020 REINSTATEMENT	View image in PDF format
11/25/2019 REINSTATEMENT	View image in PDF format
05/01/2018 ANNUAL REPORT	View image in PDF format
04/06/2017 - ANNUAL REPORT	View image in PDF format
04/22/2016 ANNUAL REPORT	View image in PDF format
10/08/2015 REINSTATEMENT	View image in PDF format
04/30/2014 ANNUAL REPORT	View image in PDF format
10/03/2013 REINSTATEMENT	View image in PDF format
07/19/2012 ANNUAL REPORT	View image in PDF format
03/29/2011 ANNUAL REPORT	View image in PDF format
05/04/2010 ANNUAL REPORT	View image in PDF format
04/29/2009 ANNUAL REPORT	View image in PDF format
05/05/2008 - ANNUAL REPORT	View image in PDF format
10/03/2007 REINSTATEMENT	View image in PDF format
04/24/2006 ~ ANNUAL REPORT	View image in PDF format
04/02/2005 ANNUAL REPORT	View image in PDF format
02/27/2004 ANNUAL REPORT	View image in PDF format
01/03/2003 Domestic Profit	View image in PDF format



DisposAll, Inc 3941 Bryn Mawr Street Orlando, Florida 32808

September 29th, 2025

To whom it may concern:

As of the date of the correspondence stated above, DisposAll, as well as its Managing Member/Owner, has never had involvement as a subject or as a part in any litigation, criminal proceedings, or agency enforcement cases.

I, Paula Calabrese, VP of __DisposAll, do attest the above statement to be true and correct.

State Florida

Signature

County of Polk

The foregoing instrument was acknowledged before me this_

_day of

Wersonally Know or Produced identification

Notary Signature

Notary Seal

Notary Public State of Fioride Megan N Williams My Commission HH 577593 Expires 7/31/2028

					T			
POLK COUNTY WASTE & RECYCL					OFFICE USE ONLY			
NON-EXCLUSIVE COMMERCIAL F	RANCHISE ANNUAL VEHICLE	LIST			DATE RECEIVED			
FRANCHISEE					DATE TO AUDITING			
			#5					
FOR YEAR			5		ACCEPTED			
		Т —	TYPE			T		
VEHICLE MAKE	VEHICLE MODEL	YEAR	(RO, REL, FEL, ASL, ETC.)	CAPACITY (CU YD)	VEHICLE SIZE (GVW)	VEHICLE IDENTIFICATION NUMBER		
SOB ATTAC	HOD LIST							

DisposAll, Inc. Vehicle List

Veh#	Co#	Year	Vlake and Mode	Body Style	GVW	VIN	Location	License#	State	Expires
1	182	2019	MACK GU713	RO Galbreath	66,000	1M2GR2GC5KM004519	Orlando	P4554E	Florida	12/31/2025
2	185	2023	MACK GU713	RO Galbreath	66,000	1M2GR3GC2PM033683	Orlando	P1802J	Florida	12/31/2025
3	WN-101	2019	MACK GU713	RO Galbreath	66,000	1M2GR2GC8KM004241	Orlando	P1204K	Florida	12/31/2025
4	WN-102	2024	MACK GU713	RO Galbreath	64,000	1M2GR2GC8RM041753	Orlando	P2896I	Florida	12/31/2025

NG					OFFICE USE ONLY			
ANCHISE ANNU	AL CONTAINE	R LIST						
					DATE TO AUDITING			
			e e		ACCEPTED		*	
	CONTAINER	R TYPE/SIZE		CAPACITY	COLLECTION	FREQUENCY	CONTAINER IDENTIFICATIO	
DUMPSTER	COMPACTOR	COMPACTOR ROLL OFF		(CU YD)	ON CALL	DAYS/WK	NUMBER	
20yd		1			J		None	
	40yd	√			J		GR-35	
30yd		√			√		None	
	30yd	√			√		GR-85	
30yd		√			√		None	
20yd		\checkmark			√		None	
20yd		√			√		None	
30yd		√			√		None	
20yd		√			√		None	
20yd		√			√		None	
30yd		√			J		None	
20yd		√			J		None	
20yd		√			√ V		None	
							HOILE	
	DUMPSTER 20yd 30yd 20yd 20yd 20yd 20yd 20yd 20yd 20yd 20yd 20yd 20yd	CONTAINER DUMPSTER COMPACTOR 20yd 40yd 30yd 30yd 20yd 20yd	CONTAINER TYPE/SIZE DUMPSTER COMPACTOR ROLL OFF 20yd 40yd 30yd 30yd 40yd 40yd	CONTAINER TYPE/SIZE	CONTAINER TYPE/SIZE	ANCHISE ANNUAL CONTAINER LIST DATE TO AUDITING	ANCHISE ANNUAL CONTAINER LIST DATE RECEIVED DATE TO AUDITING ACCEPTED CONTAINER TYPE/SIZE COMPACTOR COMPACTOR ROLL OFF OTHER COMPACTOR COMPACTOR ROLL OFF OTHER COMPACTOR ACCEPTED COLLECTION FREQUENCY ON CALL DAYS/WK AUDITION AUDITION AUDITION ACCEPTED COLLECTION FREQUENCY ON CALL DAYS/WK AUDITION AUDITION AUDITION AUDITION ACCEPTED COLLECTION FREQUENCY ON CALL DAYS/WK AUDITION AUDITION AUDITION AUDITION ACCEPTED COLLECTION FREQUENCY ON CALL DAYS/WK AUDITION AU	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/29/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

11	is certificate does not confer rights t	o the	cert	ificate holder in lieu of s	uch en	dorsement(s).				
PRO	DUCER		CONTACT Shelia Robertson								
Ac	risure Southeast Partners Insurance	Ser	vice	s, LLC	PHONE (A/C, No, Ext): 800-845-8437 (A/C, No):						
13	17 Citizens Blvd esburg FL 34748				E-MAIL ADDRESS: SRobertson@acrisure.com						
LE	espuig / L 34/48									NAIC#	
				License#: BR-1796553	INSURE	RA: AXIS Su					26620
INS	IRED			DISPINC-02				Company, Inc.			28860
Dis	sposall, Inc.					RC: QBE Ins					39217
	D. Box 161417 amonte Springs FL 32716				INSURE						
Alta	amonte Springs / L 327 10				INSURE						
					INSURE						
CO	VERAGES CER	TIFIC	ATE	NUMBER: 1258081224	Missing			REVISION NUM	BER:		
TI IN	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I XCLUSIONS AND CONDITIONS OF SUCH	QUIR	EME	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN' ED BY	Y CONTRACT THE POLICIE:	or other i S describei	DOCUMENT WITH D HEREIN IS SUE	1 RESPEC	T TO V	VHICH THIS
INSR		ADDL	SUBR		DECINI	POLICY EFF (MM/DD/YYYY)	POLICY EXP		LIMITS		
LTR	TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICY NUMBER SP004705042024		(MM/DD/YYYY) 12/6/2024	12/6/2025	EACH OCCURRENC		\$ 1,000,	000
А				37004703042024		12/0/2024	121012020	DAMAGE TO RENTE	ED	\$ 100.00	
	CLAIMS-MADE X OCCUR							PREMISES (Ea occu MED EXP (Any one p	D. CI.DU	\$ 100,000	
								PERSONAL & ADV II		\$ 1,000.	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG		\$ 2,000,	
	POLICY X PRO-							PRODUCTS - COMP		\$ 2,000,	
	OTHER:									\$	
В	AUTOMOBILE LIABILITY			AQ1YFL001850-04		12/6/2024	12/6/2025	COMBINED SINGLE (Ea accident)	LIMIT	\$ 1,000,	000
	ANY AUTO							BODILY INJURY (Pe	er person)	\$	
	OWNED X SCHEDULED AUTOS ONLY							BODILY INJURY (Pe	er accident)	\$	
	X HIRED X NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)	E	\$	
	AUTOS ONET							PIP Basic		\$ 10,000)
Α	UMBRELLALIAB X OCCUR			SX004706042024		12/6/2024	12/6/2025	EACH OCCURRENC	E	\$ 3,000,	000
	X EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$ 3,000,	000
	DED . RETENTION \$									\$	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			202001194		10/24/2024	10/24/2025	STATUTE	OTH- ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDEN	NT.	\$ 1,000,	000
	OFFICER/MEMBEREXCLUDED? (Mandatory in NH)							E,L. DISEASE - EA E	MPLOYEE	\$ 1,000,	000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLI	ICY LIMIT	\$ 1,000,	
Α	Professional Liab Professional Liab			SP004705042024		12/6/2024	12/6/2025	Each Claim Aggregate		\$1,000 \$2,000	
DESC	 CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	.ES (A	CORD	101, Additional Remarks Schedul	e, may be	e attached if more	space is require	ed)			
					0.1110						
CEI	RTIFICATE HOLDER	_	_		CANC	ELLATION					
Polk County Solid Waste					ACC	EXPIRATION ORDANGE WIT	DATE THE	ESCRIBED POLICI REOF, NOTICE Y PROVISIONS.			
	10 Environmental Loop South Winter Haven FL 33880					AUTHORIZED REPRESENTATIVE					



Receipt #
Date:
Time:
Location:
Cashier:

3552010 09/30/2025 4:06 pm 16:06:51 ONLINE PAYMENTS OPY

Items Paid

Type	Tax Year / Item	Description/ Account	Amount
Business Tax	2025	82504	57.75
Credit Card Fee			1.44
		Item Total	59.19

Payments

Method	Payee		Account/Check#	Amount
CREDIT	DISPOSALL INC.		XXXX-2480	59.19
			Payment Total	59.19

Change Due 0.00
Balance 0.00

****End****

^{*} Note - Online Payment

AFFIDAVIT SUPPORTING RENEWAL OF NONEXCLUSIVE FRANCHISE TO COLLECT, REMOVE, AND TRANSPORT COMMERCIAL SOLID WASTE WITHIN POLK COUNTY

STATE OF I	FLORIDA F <u>ORANGE</u>
Before me.	the undersigned notary public authorized to administer oaths, personally appeared who, first being duly sworn, on oath deposes and states, as follows:
1)	He is \sqrt{P} , a \cancel{HordA} corporation.
2)	He has personal knowledge of the facts stated in this Affidavit and that all such facts are true and correct.
3)	There are no unsatisfied judgments entered against
4)	There are no liens of record filed by the Internal Revenue Service against TISPOSALL TIVE.
5)	There are no liens of record filed by the State of Florida, or any agency or subdivision thereof, against
6)	DISPOSALL acknowledges and consents that the County shall have the right to inspect DISPOSALL's vehicles, containers, compactors, and other equipment at any time.
7)	During the time of the existing Commercial Franchise, DISPOSAL TUC has complied with all of the requirements stated in the Polk County Ordinance 13-069 and with all other applicable laws, and if awarded a renewal term will continue to comply with the same.
Further the aff	fiant sayeth not.
Dated (the 2rd day of October, 2035 Paula Calabrese, VP Printed Name and Title of Sworn Person
The foregoing has produced _	instrument was sworn (or affirmed) and subscribed before me thisday of, 20_25, by(a COLONESC, who is either personally known to me; or as identification.
Me My C	Public State of Florida bgan N Williams ommission HH 577593 kpires 7/31/2028 Printed Name of Notary Public O7/31/28
(AFFIX NOTO	DRIAL SEAL) Notary Commission Number/Expiration

INDEMNITY

Thank you for your payment!

This service has been provided by Polk County BoCC - Solid Waste, FL and Point & Pay. We value your business. Please keep this receipt for future reference.

You have made a payment to Polk County BoCC - Solid Waste, FL . The Polk County BoCC - Solid Waste department Thanks You For Your Payment, Credit Card Services provided by Polk County BoCC - Solid Waste department are in connection with POINT & PAY.

Name:

Eugene Calabrese

Address:

140 Spring Isle Trail, Altamonte Springs FL, US, 32714-3417

Contact:

4077881111

Comments:

Payment ID:

183839216

Date:

10/09/25 02:00 PM

Subtotal:

\$750.00

Fee: Total: \$23.15 \$773.15

Method:

Credit Card(*********2480)

Item Purchased	Transaction Description	Account	Amount
License Renewal	CTYPolkWsteGOV	DisposAll, Inc	\$750.00

Signature:	///////	
Designation this property course to the terms of	ad conditions of this convice	

By signing this receipt you agree to the terms and conditions of this service.

You will see one line item on your credit or debit card statement indicating the amount you paid and will be identified as CTYPolkWsteGOV. If you have any questions about the charges please call 1-888-891-6064.

Print Receipt Close Window