

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001049

FILED
Feb 28, 2005
Secretary of State

Entity Name: AMERICAN WATER SERVICES (USA), INC.

Current Principal Place of Business:

1025 LAUREL OAK DR
VOORHEES, NJ 08043 US

New Principal Place of Business:

1025 LAUREL OAK ROAD
VOORHEES, NJ 08043

Current Mailing Address:

1025 LAUREL OAK DR
VOORHEES, NJ 08043 US

New Mailing Address:

1025 LAUREL OAK ROAD
VOORHEES, NJ 08043

FEI Number: 98-0165920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: DP () Delete
Name: LYNCH, WALTER
Address: 10000 SAGEMORE DR, #10101
City-St-Zip: MARLTON, NJ 08053

Title: DVPS () Delete
Name: EISENSTADT, WILLIAM B
Address: 10000 SAGEMORE DR, #10101
City-St-Zip: MARLTON, NJ 08053

Title: DVPT () Delete
Name: BRUNT, ROBERT
Address: 10000 SAGEMORE DR, #10101
City-St-Zip: MARLTON, NJ 08053

Title: ASEC (X) Delete
Name: BAYLINSON, JUDITH E
Address: 10000 SAGEMORE DR, #10101
City-St-Zip: MARLTON, NJ 08053

Title: ASEC (X) Delete
Name: WALLACE, MOIRA
Address: 100 KING STREET WEST, SUITE 2100
City-St-Zip: HAMILTON, ON L8P 4X1

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WOOD, GRAHAM
Address: 1025 LAUREL OAK ROAD
City-St-Zip: VOORHEES, NJ 08043

Title: DVS (X) Change () Addition
Name: EISENSTADT, WILLIAM B
Address: 1025 LAUREL OAK ROAD
City-St-Zip: VOORHEES, NJ 08043

Title: VT (X) Change () Addition
Name: KOCHANSKI, GERALD
Address: 1025 LAUREL OAK ROAD
City-St-Zip: VOORHEES, NJ 089043

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 Section 119.07(3)(i), 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: WILLIAM B. EISENSTADT

VS

02/28/2005

Electronic Signature of Signing Officer or Director

_____ Date