


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # F0000005408

1. Entity Name
WEBSTER ENVIRONMENTAL ASSOCIATES, INC.



Principal Place of Business Mailing Address

13121 EASTPOINT PARK BLVD., SUITE E 13121 EASTPOINT PARK BLVD., SUITE E
 LOUISVILLE, KY 40223 LOUISVILLE, KY 40223

DO NOT WRITE IN THIS SPACE



03232007 No Chg-P CR2E034 (11/05)

4. FEI Number 61-1011402	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DECUBELLIS & MEEKS, P.A.
 837 NORTH GARLAND AVENUE
 ORLANDO, FL 32801

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD WEBSTER, NEIL A P.E. 107 REST COTTAGE LANE PEWEE VALLEY, KY 40556
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RUSH, J.W. (BUZ) III 14203 OAK BRANCH COURT LOUISVILLE, KY 40245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WEBSTER, BARBARA 107 REST COTTAGE LANE PEWEE VALLEY, KY 40556
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KOETTER, BRUCE 3035 LEAF DR NEW ALBANY, IN 47150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/01/07-80133-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barbara B Webster Sec/Treas 4/19/07 502-241-9312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #