

# 2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **F01000002627**

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Entity Name  
**AZURIX NORTH AMERICA RESIDUALS MANAGEMENT, INC.**  
*CHANGED NAME IN FL ON 7/23/02 TO:*  
**AMERICAN WATER SERVICES RESIDUALS MANAGEMENT, INC.**

Principal Place of Business  
1400 SMITH STREET  
HOUSTON TX 77002-7361

Mailing Address  
1400 SMITH STREET  
HOUSTON TX 77002-7361



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
10,000 SAGEMORE DR.  
Suite, Apt. #, etc. 10101  
City & State MARLTON, N.J.

3. Mailing Address  
10,000 SAGEMORE DR.  
Suite, Apt. #, etc. 10101  
City & State MARLTON, N.J.

Zip 08053 Country USA

4. FEI Number **52-2062646** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**NRAI SERVICES, INC.**  
526 EAST PARK AVENUE  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent  
Name \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
City \_\_\_\_\_ State **FL** Zip Code \_\_\_\_\_

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 \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  **FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	STOKES, JOHN M	1400 SMITH STREET	HOUSTON TX 77002	<input checked="" type="checkbox"/>
VD	ALE, JOHN C	1400 SMITH STREET	HOUSTON TX 77002	<input checked="" type="checkbox"/>
V	BRENZIL, LYLE	1400 SMITH STREET	HOUSTON TX 77002	<input checked="" type="checkbox"/>
V	CARVER, MEL	1400 SMITH STREET	HOUSTON TX 77002	<input type="checkbox"/>
V	JACKOBSON, HOWARD	1400 SMITH STREET	HOUSTON TX 77002	<input type="checkbox"/>
V	MARTIN, AMANDA K	1400 SMITH STREET	HOUSTON TX 77002	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PRESIDENT	MAXWELL, TOM	394 ESTATE DRIVE, SHERWOOD PARK	EDMONTON, AB T6E 0C1 CANADA	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VD	SMITH, L	7156 APPLEBY LANE	MILTON, ON. K9T 2Y1 CANADA	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSISTANT SECRETARY	WALLACE, MOIRA	263 DELANCEY BLVD	HAMILTON, ON. L9B 1Y8	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VICE PRESIDENT	SPENCER, S.	4-5490 GLEN ERIN DRIVE	MISSISSAUGA, ON. L5M 5R4 CANADA	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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\*\*\*550.00 \*\*\*550.00

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* July 25/02 (905) 572-5884  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)