

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004149

FILED  
Feb 07, 2008  
Secretary of State

Entity Name: APPLIED WATER MANAGEMENT, INC.

**Current Principal Place of Business:**

2 CLERICO LANE  
HILLSBOROUGH, NJ 08844

**New Principal Place of Business:**

**Current Mailing Address:**

2 CLERICO LANE  
HILLSBOROUGH, NJ 08844

**New Mailing Address:**

FEI Number: 22-3608285      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 DR.  
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: P ( ) Delete  
Name: DAVIES, TIMOTHY J  
Address: 2 CLERICO LANE  
City-St-Zip: HILLSBOROUGH, NJ 08844

Title: VP ( ) Delete  
Name: SCHWARTZ, ROBERT F  
Address: 2 CLERICO LANE  
City-St-Zip: HILLSBOROUGH, NJ 08844

Title: VP ( ) Delete  
Name: HIGGINS, ANDREW J  
Address: 2 CLERICO LANE  
City-St-Zip: HILLSBOROUGH, NJ 08844

Title: D ( ) Delete  
Name: EISENSTADT, WILLIAM B  
Address: 1025 LAUREL OAK ROAD  
City-St-Zip: VOORHEES, NJ 08043

Title: D ( ) Delete  
Name: STRAUSS, MARK F  
Address: 1025 LAUREL OAK ROAD  
City-St-Zip: VOORHEES, NJ 08043

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: ANTHONY, DOUGLAS  
Address: 1025 LAUREL OAK ROAD  
City-St-Zip: VOORHEES, NJ 08043

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Change (X) Addition  
Name: WALTERS, LOUIS  
Address: 1025 LAUREL OAK ROAD  
City-St-Zip: VOORHEES, NJ 08043

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TIMOTHY J DAVIES

P

02/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date