2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005822

Entity Name: OSMOSE UTILITIES SERVICES, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
980 ELLICOTT STREET BUFFALO, NY 14209 US						
Current Mailing Address:			New Mailing Address:			
980 ELLICO BUFFALO,	OTT STREET NY 14209	US				
FEI Number: 3	35-2175310	FEI Number Applied For () FEI Num	nber Not Appli	cable () Cert	ificate of Status Desired()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
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:						
	Electron	ic Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CD () SPENGLER, JA 980 ELLICOTT BUFFALO, NY	STREET	Title: Name: Address: City-St-Zip:	()Char	ige () Addition	
Title: Name: Address: City-St-Zip:	PD () LARSON, LARF 55 B JEFFERS NEWNAN, GA	ON PKWY	Title: Name: Address: City-St-Zip:	PD (X) Char LARSON, LARRY B 215 GREENCASTLE TYRONE, GA 30290	nge () Addition	
Title: Name: Address: City-St-Zip:	V () BUTERA, ROBE 980 ELLICOTT BUFFALO, NY	STREET	Title: Name: Address: City-St-Zip:	()Char	ge () Addition	
Title: Name: Address: City-St-Zip:	V () CHILDRESS, R 55 B JEFFERS NEWNAN, GA	ON PKWY	Title: Name: Address: City-St-Zip:	V (X) Char CHILDRESS, RON A 215 GREENCASTLE TYRONE, GA 30290		
Title: Name: Address: City-St-Zip:	V () LANDER, DON 55 B JEFFERS NEWNAN, GA	ON PKWY	Title: Name: Address: City-St-Zip:	V (X) Char LANDER, DONALD 2 215 GREENCASTLE TYRONE, GA 30290		
Title: Name: Address: City-St-Zip:	VSTD () JENTSCH, MAF 980 ELLICOTT BUFFALO, NY	STREET	Title: Name: Address: City-St-Zip:	()Char	ige () Addition	

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: JOHN C. CASPER AS 04/30/2007