

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000844

FILED  
Aug 05, 2008  
Secretary of State

Entity Name: AQUAVENTURE MANAGEMENT COMPANY INC.

## Current Principal Place of Business:

C/O GOODWIN PROCTOR LLP  
53 STATE STREET, EXCHANGE PLACE  
BOSTON, MA 02109

## New Principal Place of Business:

14400 CARLSON CIRCLE  
TAMPA, FL 33626

## Current Mailing Address:

C/O GOODWIN PROCTOR LLP  
53 STATE STREET, EXCHANGE PLACE  
BOSTON, MA 02109

## New Mailing Address:

14400 CARLSON CIRCLE  
TAMPA, FL 33626

FEI Number: 20-8049012

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: BROWN, DOUGLAS  
Address: 53 STATE STREET, EXCHANGE PLACE  
City-St-Zip: BOSTON, MA 02109

Title: VST ( ) Delete  
Name: CURTIS, JOHN F  
Address: 53 STATE STREET, EXCHANGE PLACE  
City-St-Zip: BOSTON, MA 02109

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP ( ) Change (X) Addition  
Name: LENTZ, JEFFREY R  
Address: 7 GRANLI DRIVE  
City-St-Zip: ANDOVER, MA 01810

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: JEFFREY R LENTZ

VP

08/05/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date