

2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jun 21, 2000 8:00 am Secretary of State

05-05-2000 90044 041 ***150.00

DOCUMENT # F90922
 1. Entity Name
DAVIS WATER ANALYSIS, INC. SYRACUSE OF FLORIDA - DAVIS WATER, INC.

Principal Place of Business Mailing Address
 5601 3RD AVE BOX 2584
 UNIT #1 KEY WEST FL 33045-2584
 US US

2. Principal Place of Business 3. Mailing Address
 8911 Overseas Highway 8911 Overseas Hwy
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 TAVERNIER, FL. TAVERNIER, FL.
 Zip Country Zip Country
 33070 33070

4. FEI Number 59-2210462 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 DAVIS, JOSEPH H.
 1120 GRINNELL
 KEY WEST FL 33040

7. Name and Address of New Registered Agent
 Name CT CORPORATION SYSTEM
 Street Address (P.O. Box Number, if Not Applicable) 1200 South Pine Island Road
 City Plantation FL Zip Code 33324

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.
 SIGNATURE *Victor Alfano* Victor Alfano Asst. Secretary, CT Corporation System 6/14/2000
Signature, typed or printed name of registered agent and file if applicable. (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. (See criteria on back)

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	PD DAVIS, JOSEPH 1120 GRINNELL KEY WEST FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BURKEMPER, MARK 2315 PATTERSON KEY WEST FL 33040 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ROSS PATTEN 1800 BERLING, 1000 HOUSTON, TX 77057 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT MARK A. ROMO 1800 BERLING, 1000 HOUSTON, TX, 77057 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ALVIN L. THOMAS 1800 BERLING, 1000 HOUSTON, TX 77057 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER J. PAUL WITHROW 1800 BERLING, 1000 HOUSTON, TX, 77057 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(f), 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: *Alvin L. Thomas* 6-14-00 (713) 369-1744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone