

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002893

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: WETLAND STUDIES AND SOLUTIONS, INC.

## Current Principal Place of Business:

5300 WELLINGTON BRANCH DRIVE  
SUITE 100  
GAINESVILLE, VA 20155 US

## New Principal Place of Business:

## Current Mailing Address:

5300 WELLINGTON BRANCH DRIVE  
SUITE 100  
GAINESVILLE, VA 20155 US

## New Mailing Address:

FEI Number: 54-1603789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAX CO.  
C/O MCGUIRE, WOODS, BATTLE & BOOTHE LLP  
50 N. LAURA ST., 3300 BARNETT CENTER  
JACKSONVILLE, FL 32202 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: CP ( ) Delete  
Name: ROLBAND, MICHAEL S PE,PWS  
Address: 6285 CLIFTON ROAD  
City-St-Zip: CLIFTON, VA 20124

Title: VP ( ) Delete  
Name: HEADLY, MARK W PWS,PWD  
Address: 8431 RED FOX LANE  
City-St-Zip: WARRENTON, VA 20186

Title: VP ( ) Delete  
Name: NELL, WILLIAM E PE  
Address: 10710 ROSEHAVEN STREET  
City-St-Zip: FAIRFAX, VA 22030

Title: ST ( ) Delete  
Name: MOUNTEL, LINDA M  
Address: 6285 CLIFTON ROAD  
City-St-Zip: CLIFTON, VA 20124

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LINDA M. MOUNTEL

ST

04/06/2009

Electronic Signature of Signing Officer or Director

Date