

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012031

FILED
Mar 24, 2005
Secretary of State

Entity Name: WATER MANAGEMENT CONSULTANTS, L.L.C.

Current Principal Place of Business:

124 BENNING DR
SUITE 3
DESTIN, FL 32541 US

New Principal Place of Business:

124 BENNING DR
SUITE 4
DESTIN, FL 32541 US

Current Mailing Address:

124 BENNING DR
SUITE 3
DESTIN, FL 32541 US

New Mailing Address:

124 BENNING DR
SUITE 4
DESTIN, FL 32541 US

FEI Number: 59-3734180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONERLY, LAMAR A JR.
4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PARSONS, JAMES P
Address: 124 BENNING DR SUITE 3
City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete
Name: PETERS, WAYNE
Address: 124 BENNING DR SUITE 3
City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete
Name: PETERS, CHARLENE
Address: 124 BENNING DR SUITE 3
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PARSONS, JAMES P
Address: 124 BENNING DR SUITE 4
City-St-Zip: DESTIN, FL 32541

Title: MGRM (X) Change () Addition
Name: PETERS, COLIN W
Address: 124 BENNING DR SUITE 4
City-St-Zip: DESTIN, FL 32541

Title: MGRM (X) Change () Addition
Name: PETERS, CHARLENE
Address: 124 BENNING DR SUITE 4
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: COLIN W. PETERS

MGRM

03/24/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date