

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016522

FILED
Mar 19, 2007
Secretary of State

Entity Name: EVANS ENVIRONMENTAL AND GEOLOGICAL SCIENCE AND MANAGEMENT, LLC

Current Principal Place of Business:

14505 COMMERCE WAY
SUITE 400
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

14505 COMMERCE WAY
SUITE 400
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 65-1142313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EVANS, CHARLES C
14505 COMMERCE WAY, SUITE 400
MIAMI LAKES, FL 33016 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/MANAGERS:

Title: MGR () Delete
Name: GIPE, TIMOTHY R
Address: 14505 COMMERCE WAY, SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR () Delete
Name: EVANS, CHARLES C
Address: 14505 COMMERCE WAY, SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR () Delete
Name: SKWERES, MARK
Address: 14505 COMMERCE WAY, SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR () Delete
Name: REED, DAVID
Address: 14505 COMMERCE WAY, SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR () Delete
Name: GALANTE, SUSAN M
Address: 14505 COMMERCE WAY, SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016

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

ADDITIONS/CHANGES:

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:

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

Title: MGR () Change (X) Addition
Name: WALRAD, EDWIN
Address: 14505 COMMERCE WAY, SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARK SKWERES

MGR

03/19/2007

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