2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# L01000016522

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 ( )**

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: GALANTE, SUSAN M
Address: 14505 COMMERCE WAY, SUITE 400
City-St-Zip: MIAMI, FL 33016

Title: MGR ( ) Delete
Name: WALRAD, EDWIN E
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: MGR ( ) Change (X) Addition
Name: WOODS, ADRIAN B
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 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: EDWIN WALRAD MGR 03/30/2009

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