


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000019639</b> 1. Entity Name UNITED WATER FLORIDA LLC	
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Principal Place of Business 1400 MILLCOE ROAD JACKSONVILLE, FL 32225	Mailing Address 200 OLD HOOK ROAD HARRINGTON PARK, NJ 07640
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<b>DO NOT WRITE IN THIS SPACE</b>
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01242005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 51-0414314	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	<b>DO NOT WRITE IN THIS SPACE</b>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRV GERBER, ROBERT A 200 OLD HOOK RD HARRINGTON PARK, NJ 07640
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T IMPARATO, EDWARD J 200 OLD HOOK RD HARRINGTON PARK, NJ 07640
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HJELM, CARLA E 200 OLD HOOK RD HARRINGTON PARK, NJ 07640
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALGRANATI, MICHAEL 200 OLD HOOK RD HARRINGTON PARK, NJ 07640
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>1100000235943 02/19/05-B0026-004 50.00</p>          <b>DO NOT WRITE IN THIS SPACE</b>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.
<b>SIGNATURE:</b> <u>Carla E. Helm</u> <u>2-15-05</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> <small>Date</small> <small>Daytime Phone #</small>