## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M03000004095

BLACK, JOHN P

RESTON, VA 22094

11203 LONGWOOD GROVE DRIVE

Name:

Address:

City-St-Zip:

Entity Name: WSP ENVIRONMENTAL & ENERGY, LLC

FILED Feb 12, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 11190 SUNRISE VALLEY DR. SUITE 300 RESTON, VA 20191 **Current Mailing Address: New Mailing Address:** 11190 SUNRISE VALLEY DR, SUITE 300 RESTON, VA 20191 FEI Number: 89-0401303 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete SIMON, JOHN A Name: Name: Address: 1906 35TH STREET, NW Address: City-St-Zip: WASHINGTON, DC 20007 City-St-Zip: ( ) Delete Title: MGR Title: () Change () Addition Name: CHIZZONITE, JAN J Name: Address: 4815 BENTONBROOK DRIVE Address: City-St-Zip: FAIRFAX, VA 22030 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change ( ) Addition BULMAN, JAMES P Name: BULMAN, JAMES P Name: Address: 719 N DANVILLE ST Address: 719 N DANVILLE ST City-St-Zip: ARLINGTN, VA 22201 City-St-Zip: ARLINGTON, VA 22201 Title: MGR ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN BLACK MGR 02/12/2009