

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004970

FILED
Apr 30, 2010
Secretary of State

Entity Name: WATER & ENERGY SAVINGS COMPANY, LLC

Current Principal Place of Business:

100 CONSTELLATION WAY
STE 1700P
BALTIMORE, MD 21202

New Principal Place of Business:

Current Mailing Address:

100 CONSTELLATION WAY
STE 1700P
BALTIMORE, MD 21202

New Mailing Address:

FEI Number: 35-1871597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name: JAROSINSKI, GREGORY S
Address: 100 CONSTELLATION WAY - STE 1700P
City-St-Zip: BALTIMORE, M 21202

Title: MGR
Name: BRASLAU, DAVID S
Address: 100 CONSTELLATION WAY - STE 1700P
City-St-Zip: BALTIMORE, MD 21202

Title: MGR
Name: CREIGHTON, JAMES I
Address: 100 CONSTELLATION WAY - STE 1700P
City-St-Zip: BALTIMORE, MD 21202

Title: MGR
Name: LONKEVYCH, MARK
Address: 100 CONSTELLATION WAY - STE 1700P
City-St-Zip: BALTIMORE, MD 21202

Title: MGR
Name: LUOMA, WAYNE E
Address: 100 CONSTELLATION WAY - STE 1700P
City-St-Zip: BALTIMORE, MD 21202

Title: MGR
Name: BERARDESCO, CHARLES A
Address: 100 CONSTELLATION WAY - STE 1700P
City-St-Zip: BALTIMORE, MD 21202

I hereby 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: CHARLES A BERARDESCO

SEC

04/30/2010

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