

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50023

FILED
Apr 22, 2007
Secretary of State

Entity Name: WATER MANAGEMENT INSTITUTE, INC.

Current Principal Place of Business:

31 WEST 20TH ST
SUITE 202
RIVIERA BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10441
RIVIERA BEACH, FL 33419 US

New Mailing Address:

FEI Number: 59-3133873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WARD, GERALD M
31 W 20TH ST
SUITE 202
RIVIERA BEACH, FL 33404 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LINDAHL, JR, LENNART J P.E.
Address: 3550 SW CORPORATE PKWY
City-St-Zip: PALM CITY, FL 34990

Title: DT () Delete
Name: BLAIN, L. M.,
Address: 801 S BOULEVARD
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: BRAIDS, OLIN C.,
Address: 9119 CORPORATE LAKE DRIVE, SUITE 150
City-St-Zip: TAMPA, FL 33634

Title: DP () Delete
Name: HIGGINS, ROBERT W
Address: 4623 FOREST HILL BLVD., STE. 113
City-St-Zip: WEST PALM BEACH, FL

Title: D () Delete
Name: MANSON, DOUGLAS J ESQUIRE
Address: 712 S. OREGON AVENUE
City-St-Zip: TAMPA, FL 33606 US

Title: S () Delete
Name: WARD, GERALD M
Address: 31 W 20TH ST., SUITE 202
City-St-Zip: RIVIERA BEACH, FL 33404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LINDAHL, LENNART J P.E.
Address: 3550 SW CORPORATE PKWY
City-St-Zip: PALM CITY, FL 34990

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

Title: DAT (X) Change () Addition
Name: BRAIDS, OLIN C.,
Address: 9119 CORPORATE LAKE DRIVE, SUITE 150
City-St-Zip: TAMPA, FL 33634

Title: D (X) Change () Addition
Name: HIGGINS, ROBERT W
Address: 4623 FOREST HILL BLVD., STE. 113
City-St-Zip: WEST PALM BEACH, FL

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

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

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD M. WARD

SEC.

04/22/2007

Electronic Signature of Signing Officer or Director

Date