2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 22, 2008
Secretary of State

DOCUMENT# P00000031758

Entity Name: ACCESS ENVIRONMENTAL ASSOCIATES, INC.

Current Principal Place of Business:

10250 NORMANDY BLVD, SUITE 604
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

15 OLD MISSION AVE
JACKSONVILLE, FL 32084

New Mailing Address:

FEI Number: 59-3636732 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AKEL, DANIEL D
ONE INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE, FL 32202 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: P ( ) Delete
Name: FAUST, EARL
Address: 9350 ZAMBITO ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32210

Title: S ( ) Delete
Name: FAUST, ELIZABETH
Address: 9350 ZAMBITO ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32210

Title: V (X) Delete
Name: NAPIER, JONATHAN
Address: 2485 PELLICER RD.
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: T (X) Delete
Name: NAPIER, CHANDA
Address: 2485 PELLICER RD.
City-St-Zip: SAINT AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EARL FAUST P 05/22/2008

Electronic Signature of Signing Officer or Director — Date