2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P05000147827

Entity Name: WATER MANAGEMENT CONSULTANTS & TESTING, INC.

Current Principal Place of Business:

124 BENNING DRIVE
SUITE 4
DESTIN, FL 32541

New Principal Place of Business:

295 AZALEA
UNIT #2
DESTIN, FL 32541

Current Mailing Address:

124 BENNING DRIVE
SUITE 4
DESTIN, FL 32541

New Mailing Address:

295 AZALEA
UNIT #2
DESTIN, FL 32541

FEI Number: 20-3749166 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAW OFFICE OF LAMAR A. CONERLY, P.A.
4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PARSONS, JIM
Address: 124 BENNING DRIVE
City-St-Zip: DESTIN, FL 32541

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MGRM ( ) Change (X) Addition
Name: PETERS, COLIN W
Address: 295 AZALEA UNIT #2
City-St-Zip: DESTIN, FL 32541

Title: MGRM ( ) Change (X) Addition
Name: PETERS, CHARLENE
Address: 295 AZALEA UNIT #2
City-St-Zip: DESTIN, FL 32541

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

SIGNATURE: COLIN W PETERS MGRM 04/28/2006

Electronic Signature of Signing Officer or Director — Date