2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000128350

Entity Name: AMERICAN WATER SYSTEMS INC

Current Principal Place of Business:	**New Principal Place of Business:**
185 OSPREY RIDGE WAY PORT ST. LUCIE, FL 34984 US	

Current Mailing Address:	**New Mailing Address:**
185 OSPREY RIDGE WAY PORT ST. LUCIE, FL 34984 US	

FEI Number: 20-5680633   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:**
SINGH, DAVID 185 OSPREY RIDGE WAY PORT ST. LUCIE, FL 34984 US	

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS	ADDITIONS/CHANGES
Title: PRES ( ) Delete Name: SINGH, DAVID Address: 185 OSPREY RIDGE WAY City-St-Zip: PORT ST. LUCIE, FL 34984 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: TRES ( ) Delete Name: SINGH, DAVID Address: 185 OSPREY RIDGE City-St-Zip: PORT ST. LUCIE, FL 34984 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: SECT ( ) Delete Name: KNOTT, WARREN Address: 185 OSPREY RIDGE City-St-Zip: PORT ST. LUCIE, FL 34984 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: DIR ( ) Delete Name: SINGH, DAVID Address: 185 OSPREY RIDGE City-St-Zip: PORT ST. LUCIE, FL 34984 US	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: DAVID SINGH   D   01/11/2008

        Electronic Signature of Signing Officer or Director   Date