

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 21, 2008  
Secretary of State**

DOCUMENT# P07000010261

Entity Name: GATOR ENGINEERING & AQUIFER RESTORATION, INC.

**Current Principal Place of Business:**

1620 REDWOOD GROVE TERRACE  
LAKE MARY, FL 32746

**New Principal Place of Business:**

1173 SPRING CENTRE S. BLVD.  
SUITE C  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

1620 REDWOOD GROVE TERRACE  
LAKE MARY, FL 32746

**New Mailing Address:**

1173 SPRING CENTRE S. BLVD.  
SUITE C  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 20-8287302

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILSON, NELSON N  
1620 REDWOOD GROVE TERRACE  
LAKE MARY, FL 32746 US

**Name and Address of New Registered Agent:**

WILSON, NELSON N  
1173 SPRING CENTRE S. BLVD.  
SUITE C  
ALTAMONTE SPRINGS, FL 32714 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

08/21/2008

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WILSON, NELSON N  
Address: 1620 REDWOOD GROVE TERRACE  
City-St-Zip: LAKE MARY, FL 32746

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: WILSON, NELSON N  
Address: 1173 SPRING CENTRE S. BLVD., SUITE C  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP ( ) Change (X) Addition  
Name: HILL, MICHAEL A  
Address: 1173 SPRING CENTRE S. BLVD., SUITE C  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: NELSON N. WILSON

Electronic Signature of Signing Officer or Director

DPST

08/21/2008

Date