## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F06000001482

FILED Jan 04, 2008 Secretary of State

Entity Name: CALIFORNIA URBAN WATER CONSERVATION COUNCIL, INC.

**Current Principal Place of Business:** New Principal Place of Business:

455 CAPITOL MALL, SUITE 703 455 CAPITOL MALL

SACRAMENTO, CA 95814 SUITE 703

SACRAMENTO, CA 95814

**Current Mailing Address:** New Mailing Address:

455 CAPITOL MALL, SUITE 703 455 CAPITOL MALL

SACRAMENTO, CA 95814 SUITE 703

SACRAMENTO, CA 95814

FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

FEI Number: 68-0318069 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DAVIS IV, NORMAN H DAVIS IV, NORMAN H 1220 TECH BLVD 1220 TECH BOULEVARD TAMPA, FL 33619 TAMPA, FL 33619 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: NORMAN HARCOURT DAVIS, IV 01/04/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

WESSELMAN, ERIC FLOREY, LYNN Name: Name: 85 SECOND STREET, 2ND FLOOR Address: 404 AVIATION BLVD Address: City-St-Zip: SAN FRANCISCO, CA 94105 City-St-Zip: SANTA ROSA, CA 95403

Title: Title: MS. (X) Change ( ) Addition () Delete

Name: HAASZ, DANA Name: LEIMBACH, JULIE Address: 1155 MARKET STREET, 1ST FLOOR Address: 1230 SCOTT ROAD City-St-Zip: SAN FRANCISCO, CA 94103 City-St-Zip: COLOMA, CA 95613

Title: () Delete Title: (X) Change ( ) Addition

ADENIJI, ADE Name: COTTON, MARY LOU Name: ADRO ENVIROMENTAL, 503 HAKER ST 1000 HILL ROAD, SUITE 200 Address: Address: City-St-Zip: SAN PEDRO, CA 90731 City-St-Zip: VENTURA, CA 93003

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

SIGNATURE: LYNN FLOREY MS. 01/04/2008