
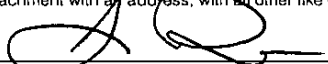


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2008 8:00 am**  
**Secretary of State**

04-22-2008 90027 030 \*\*\*150.00

<b>DOCUMENT # F98000002701</b>			
1. Entity Name NATIONAL WATER & POWER, INC.			
Principal Place of Business 22 EXECUTIVE PARK IRVINE, CA 92614		Mailing Address 22 EXECUTIVE PARK IRVINE, CA 92614	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RADICE, MIKE	NAME	
STREET ADDRESS	22 EXECUTIVE PARK	STREET ADDRESS	
CITY-ST-ZIP	IRVINE, CA 92614	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REED, RON	NAME	
STREET ADDRESS	395 ROCK CREEK DR	STREET ADDRESS	
CITY-ST-ZIP	ANN ARBOR, MI 48104	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FEUILLE, JAMES M	NAME	
STREET ADDRESS	TWO EMBARCADERO CENTER, STE 2200	STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO, CA 94111	CITY-ST-ZIP	
TITLE	VST <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LITTLE, RICHARD	NAME	
STREET ADDRESS	22 EXECUTIVE PARK	STREET ADDRESS	
CITY-ST-ZIP	IRVINE, CA 92614	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROCKER, DOUGLAS II	NAME	
STREET ADDRESS	71 S WACKER DR STE 3400	STREET ADDRESS	
CITY-ST-ZIP	CHICAGO, IL 60606	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANDERS, JASON	NAME	
STREET ADDRESS	1680 MICHIGAN AVE., 8TH FL.	STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH, FL 33139	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: 4/17/2008	Daytime Phone #: 949-253-2525
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>

ATTACHMENT 40076971

# F98000002701

NWP Services Corporation  
Officers and Directors  
As of 4/17/08

P/D  
RADICE, MIKE  
22 EXECUTIVE PARK  
IRVINE, CA 92614

S  
REEVE, LANA  
22 EXECUTIVE PARK  
IRVINE, CA 92614

T  
KHAMIS, JOHN  
22 EXECUTIVE PARK  
IRVINE, CA 92614

C/D  
FEUILLE, JAMES M  
TWO EMBARCADERO CENTER, STE 2200  
SAN FRANCISCO, CA 94111

D  
REED, RON  
395 ROCK CREEK DRIVE  
ANN ARBOR, MI 48104

D  
SANDERS, JASON  
1 BLUXOME STREET NO. 411  
SAN FRANCISCO, CA 94107

D  
HEADLEY, RICK  
10248 IDLE PINE LANE  
BONITA SPRINGS, FL 34135

D  
BARMETTLER, MIKE  
4901 BIRCH STREET  
NEWPORT BEACH, CA 92660