


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90071 047 ***150.00

DOCUMENT # F94000003818

1. Entity Name
INDIANTOWN COGENERATION FUNDING CORPORATION



Principal Place of Business Mailing Address
9405 ARROWPOINT BLVD **9405 ARROWPOINT BLVD**
CHARLOTTE, NC 28273-8110 **CHARLOTTE, NC 28273-8110**

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

400000



03132008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
52-1889595 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BONNER, THOMAS J		NAME	Bonner, Thomas J.	
STREET ADDRESS	9405 ARROWPOINT BLVD		STREET ADDRESS	9405 Arrowpoint Blvd.	
CITY-ST-ZIP	CHARLOTTE, NC 282738110		CITY-ST-ZIP	Charlotte NC 28273-8110	
TITLE	VTD	<input checked="" type="checkbox"/> Delete	TITLE	VT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'CONNOR, JOHN W		NAME	O'Connor, John W.	
STREET ADDRESS	9405 ARROWPOINT BLVD		STREET ADDRESS	9405 Arrowpoint Blvd.	
CITY-ST-ZIP	CHARLOTTE, NC 282738110		CITY-ST-ZIP	Charlotte, NC 28273-8110	
TITLE	VSD	<input checked="" type="checkbox"/> Delete	TITLE	VS	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RIPPETOE, ELIZABETH L		NAME	Miller, Doug L.	
STREET ADDRESS	9405 ARROWPOINT BLVD		STREET ADDRESS	9405 Arrowpoint Blvd.	
CITY-ST-ZIP	CHARLOTTE, NC 282738110		CITY-ST-ZIP	Charlotte, NC 28273-8110	
TITLE	V	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HASHE, WILLIAM E		NAME		
STREET ADDRESS	9405 ARROWPOINT BLVD		STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE, NC 282738110		CITY-ST-ZIP		
TITLE	AS	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN, PHYLLIS K		NAME		
STREET ADDRESS	9405 ARROWPOINT BLVD		STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE, NC 282738110		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Carlson, Rick	
STREET ADDRESS			STREET ADDRESS	Three Charles River Place, 43 Kendrick Street	
CITY-ST-ZIP			CITY-ST-ZIP	Needham, MA 02494	

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: Anne M. Reece, Anne M. Reece, Assistant Secretary 3-31-2008 704-525-3800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

03/31/2008

ATTACHMENT

4.0069103

Indiantown Cogeneration Funding Corporation

Florida Doc. # F94000003818

Principal Office:
9405 Arrowpoint Blvd.
Charlotte, NC 28273-8110

<u>Officer</u>	<u>Title</u>
Rick Carlson	V/D
Warren MacGillivray	V/D
Todd Shirley	D
Thomas J. Bonner	P
Mark A. Casper	V
Michael L. Everett	AT
Phyllis K. Green	AS
William E. Hashe	V
Christine D. Leapley	AC
Doug L. Miller	V/S
John W. O'Connor	V/T
Jacob A. Pollack	AS
Anne M. Reece	AS
S. M. Rudolph	C/CAO