

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000002073

FILED
Apr 01, 2003
Secretary of State

Entity Name: SOUTHERN POWER & ENGINEERING, LLC

Current Principal Place of Business:

4020 EAST 12TH AVENUE
TAMPA, FL 33605

New Principal Place of Business:

8918 SABAL INDUSTRIAL BLVD.
TAMPA, FL 33619

Current Mailing Address:

4020 EAST 12TH AVENUE
TAMPA, FL 33605

New Mailing Address:

8918 SABAL INDUSTRIAL BLVD.
TAMPA, FL 33619

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

Name and Address of Current Registered Agent:

WHITAKER, DANIEL D
CAREY, O'MALLEY, WHITAKER & MANSON, P.A.
712 SOUTH OREGON AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: BARRY, WILLIAM J
Address: 17924 SPENCER ROAD
City-St-Zip: ODESSA, FL 33556

Title: MGR () Delete
Name: BARRY, ELIZABETH A
Address: 17924 SPENCER ROAD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARRY, WILLIAM J
Address: 10304 CARROLL SHORES PLACE
City-St-Zip: TAMPA, FL 33612

Title: MGR (X) Change () Addition
Name: BARRY, ELIZABETH A
Address: 10304 CARROLL SHORES PLACE
City-St-Zip: TAMPA, FL 33612

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM J. BARRY

MGR

04/01/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date