

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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May 17, 1999 8:00 am
Secretary of State

05-17-1999 90077 038 ***150.00

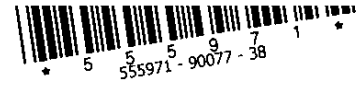
PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # ~~189488~~ (9)
 1. Corporation Name **LS9448**
ESI WEST ENFIELD, INC.

Principal Place of Business Mailing Address
 700 Universe Blvd. 700 Universe Blvd.
 Juno Beach, FL 33408 Juno Beach, FL 33408



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
 21 700 Universe Blvd. 26 700 Universe Blvd.
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Juno Beach, FL 28 Juno Beach, FL
 Zip Country Zip Country
 24 33408 25 USA 29 33408 30 USA

3. Date Incorporated or Qualified
 7/27/1990
 4. FEI Number Applied For
 65-0208753 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax. Yes No **AS ATTACHED**

9. Name and Address of Current Registered Agent
 Leon, J. E.
 9250 West Flagler Street
 Miami, FL 33174

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	<input checked="" type="checkbox"/> DELETE	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input checked="" type="checkbox"/> DELETE	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input checked="" type="checkbox"/> DELETE	
NAME		
STREET ADDRESS		
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TITLE	<input checked="" type="checkbox"/> DELETE	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input checked="" type="checkbox"/> DELETE	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Yackira, Michael W.	
1.3 STREET ADDRESS	700 Universe Blvd.	
1.4 CITY-ST-ZIP	Juno Beach, FL 33408	
2.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Hoffman, Kenneth P.	
2.3 STREET ADDRESS	700 Universe Blvd.	
2.4 CITY-ST-ZIP	Juno Beach, FL 33408	
3.1 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Boylan, Peter D.	
3.3 STREET ADDRESS	700 Universe Blvd.	
3.4 CITY-ST-ZIP	Juno Beach, FL 33408	
4.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Bonilla, Lori J.	
4.3 STREET ADDRESS	700 Universe Blvd.	
4.4 CITY-ST-ZIP	Juno Beach, FL 33408	
5.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Carpenter, Frances M.	
5.3 STREET ADDRESS	700 Universe Blvd.	
5.4 CITY-ST-ZIP	Juno Beach, FL 33408	
6.1 TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Hathaway, Scot C.	
6.3 STREET ADDRESS	700 Universe Blvd.	
6.4 CITY-ST-ZIP	Juno Beach, FL 33408	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Frances M. Carpenter* Frances M. Carpenter 3/5/99 (561)691-7171
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

L89448
555971-90077-38

ADDENDUM TO 1999 FLORIDA ANNUAL REPORT

ESI WEST ENFIELD, INC.
Document #L89488

SECTION 8

Intangible tax is paid by parent company FPL GROUP, INC., FEI #59-2449419

SECTION 13

TITLE: AS
NAME: Ponder, Stephen H.
STREET ADDRESS: 700 Universe Blvd.
Juno Beach, FL 33408

TITLE: AS
NAME: Tancer, Edward F.
STREET ADDRESS: 700 Universe Blvd.
Juno Beach, FL 33408