

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morahan
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 10 PH 2:02**

DOCUMENT # M04961 (2)

1. Corporation Name
FPL GROUP, INC.

Principal Place of Business Mailing Address
**C/O DENNIS P COYLE
700 UNIVERSE BLVD/P.O. BOX 14000
JUNO BCH FL 33408** **C/O DENNIS P COYLE
700 UNIVERSE BLVD/P.O. BOX 14000
JUNO BCH FL 33408**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
09/10/1984 **03/28/1994**

4. FEI Number Applied For
59-2449419 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 has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

**LEON, J E
9250 WEST FLAGLER STREET
MIAMI FL 33174**

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	GS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COYLE, DENNIS P	1.2 NAME	
STREET ADDRESS	700 UNIVERSE BOULEVARD	1.3 STREET ADDRESS	
CITY - ST - ZIP	JUNO BEACH FL	1.4 CITY - ST - ZIP	
TITLE	DCPC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROADHEAD, JAMES L	2.2 NAME	
STREET ADDRESS	700 UNIVERSE BOULEVARD	2.3 STREET ADDRESS	
CITY - ST - ZIP	JUNO BEACH FL	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLEHER, LAWRENCE J	3.2 NAME	
STREET ADDRESS	700 UNIVERSE BOULEVARD	3.3 STREET ADDRESS	
CITY - ST - ZIP	JUNO BEACH FL	3.4 CITY - ST - ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILNE, JACK G	4.2 NAME	
STREET ADDRESS	700 UNIVERSE BLVD	4.3 STREET ADDRESS	
CITY - ST - ZIP	JUNO BCH FL	4.4 CITY - ST - ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAMIL, DLEK L	5.2 NAME	
STREET ADDRESS	700 UNIVERSE BLVD	5.3 STREET ADDRESS	
CITY - ST - ZIP	JUNO BCH FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 removed, attachment with an address.

SIGNATURE: _____ **Dennis P. Coyle** **March 15, 1995 (407) 694-4644**

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR Date (Signatures Please)

ATTACHMENT

12. Names and Street Addresses of Each Officer and Director (Continued)

TMs	Names of Officers and Directors	Street Address	City and State
V/C	Yackira, Michael W.	700 Universe Blvd.	Juno Beach, FL
C/C	Davis, K. Michael	9250 W. Flagler St.	Miami, FL
V	Higgins, James P.	11770 U.S. Highway One	North Palm Beach, FL
A/T	Peacock, Lisa B.	11770 U.S. Highway One	North Palm Beach, FL
A/C	Stamm, Solomon L.	9250 W. Flagler St.	Miami, FL
A/T	Sutherland, Paul R.	700 Universe Blvd.	Juno Beach, FL
D	Arnelle, H. Jesse	One Market Street, Spear Street Tower, 39 Floor	San Francisco, CA
D	Beall, Robert M., II	1806 38th Ave East	Bradenton, FL
D	Blumberg, David	255 Alhambra Circle, Suite 760	Coral Gables, FL
D	Brown, J. Hyatt	220 South Ridgewood Ave.	Daytona Beach, FL
D	Codina, Armando M.	Two Alhambra Circle, Penthouse II	Coral Gables, FL
D	Criser, Marshall M.	3300 Barnett Center, 50 N. Laura St.	Jacksonville, FL
D	Dolan, B. F.	301 S. Tryon Street, Suite 1990	Charlotte, NC
D	Dover, Willard D.	500 E. Broward Blvd.	Ft. Lauderdale, FL
D	Evanson, Paul J.	700 Universe Blvd.	Juno Beach, FL
D	Lewis, Drew	Martin Tower, Eighth and Eaton Avenues	Bethlehem, PA
D	Malek, Frederic V.	901 15th Street, N.W., Suite 300	Washington, D.C.
D	Tregurtha, Paul R.	Three Landmark Square	Stamford, CT