


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90440 026 ***150.00

DOCUMENT # P14196
 1. Entity Name
FOSTER WHEELER POWER SYSTEM, INC.



Principal Place of Business Mailing Address
PERRYVILLE CORPORATE PK **PERRYVILLE CORPORATE PK**
C/O TAX DEPT **TAX DEPARTMENT**
CLINTON, NJ 08809-4000 US **CLINTON, NJ 08809 US**

14016223



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

01052004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	S	<input type="checkbox"/> Delete
NAME	FRIES GARDNER, LISA	
STREET ADDRESS	PERRYVILLE CORPORATE PARK	
CITY-ST-ZIP	CLINTON, NJ	
TITLE	CODC	<input type="checkbox"/> Delete
NAME	KARPENSKI, MARTIN J	
STREET ADDRESS	PERRYVILLE CORPORATE PK	
CITY-ST-ZIP	CLINTON, NJ	
TITLE	VPCF	<input type="checkbox"/> Delete
NAME	SCORBO, ANTHONY	
STREET ADDRESS	PERRYVILLE CORPORATE PARK	
CITY-ST-ZIP	CLINTON, NJ 08809	
TITLE	AS	<input type="checkbox"/> Delete
NAME	DOYLE, JOHN A JR.	
STREET ADDRESS	PERRYVILLE CORPORATE PARK	
CITY-ST-ZIP	CLINTON, NJ	
TITLE	DOT	<input type="checkbox"/> Delete
NAME	JINDAL, RAKESH	
STREET ADDRESS	PERRYVILLE CORPORATE PARK	
CITY-ST-ZIP	CLINTON, NJ 08809	
TITLE	SVP	<input type="checkbox"/> Delete
NAME	STUDLEY, BRUCE C	
STREET ADDRESS	PERRYVILLE CORPORATE PARK	
CITY-ST-ZIP	CLINTON, NJ 088094000	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP TAX	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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: Rakesh K Jindal **RAKESH JINDAL** 5-1-03 908 730-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #