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Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90111 024 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P96000055352

1. Corporation Name
FPL TERMOCANDELARIA, INC.

Principal Place of Business
700 UNIVERSE BLVD.
JUNO BEACH FL 33408

Mailing Address
ATTN: FRANCES M. CARPENTER
700 UNIVERSE BLVD.
JUNO BEACH FL 33408



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/27/1996

4. FEI Number
65-0684354
Applied For
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

21. Principal Place of Business
Suite, Apt. #, etc.

2a. Mailing Address
Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Zip Country

29. Zip Country

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 _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE AS DELETE
NAME TANCER, EDWARD F
STREET ADDRESS 11760 U.S. HIGHWAY ONE
CITY-ST-ZIP NORTH PALM BEACH FL

1.1 TITLE D Change Addition
1.2 NAME Hoffman, Kenneth P.
1.3 STREET ADDRESS 700 Universe Blvd.
1.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE DP DELETE
NAME LEIGHTON, MICHAEL L.
STREET ADDRESS 11760 US HIGHWAY ONE #600
CITY-ST-ZIP N. PALM BEACH FL

2.1 TITLE D/P Change Addition
2.2 NAME Leighton, Michael L.
2.3 STREET ADDRESS 700 Universe Blvd.
2.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE DV DELETE
NAME WERNEBURG, KENNETH R.
STREET ADDRESS 11760 US HIGHWAY ONE, #600
CITY-ST-ZIP N. PALM BEACH FL

3.1 TITLE D/T Change Addition
3.2 NAME Boylan, Peter D.
3.3 STREET ADDRESS 700 Universe Blvd.
3.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE DT DELETE
NAME MCGRATH, ROBERT L.
STREET ADDRESS 11760 US HIGHWAY ONE #600
CITY-ST-ZIP N. PALM BEACH FL

4.1 TITLE S Change Addition
4.2 NAME Carpenter, Frances M.
4.3 STREET ADDRESS 700 Universe Blvd.
4.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE S DELETE
NAME CARPENTER, FRANCES M.
STREET ADDRESS 11760 US HIGHWAY ONE #600
CITY-ST-ZIP N. PALM BEACH FL

5.1 TITLE AS Change Addition
5.2 NAME Tancer, Edward F.
5.3 STREET ADDRESS 700 Universe Blvd.
5.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)