

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

FILED
Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **115899** (7)
1. Corporation Name
COMPANIA CUBANA DE ELECTRICIDAD

Principal Place of Business 1111 W JEFFERSON ST BOISE IDAHO 83702 US	Mailing Address 1111 E JEFFERSON STREET TAX DEPT P.O. BOX 50 BOISE ID 83728-0050 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/13/1927	3a. Date of Last Report 04/30/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-5601102	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
81 Name					
82 Street Address (P.O. Box Number is Not Acceptable)					
83					
84 City				85	Zip Code
				FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LITTMAN, IRVING	1.2 NAME	
STREET ADDRESS	1111 W JEFFERSON STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOISE ID	1.4 CITY-ST-ZIP	
TITLE	VPS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANNITY, VINCENT T.	2.2 NAME	
STREET ADDRESS	1111 W JEFFERSON ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOISE ID	2.4 CITY-ST-ZIP	
TITLE	AT	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLACKER, E. A.	3.2 NAME	
STREET ADDRESS	1111 W JEFFERSON STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOISE ID	3.4 CITY-ST-ZIP	
TITLE	DVT	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRUMLEY, THEODORE	4.2 NAME	
STREET ADDRESS	1111 W JEFFERSON STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOISE ID	4.4 CITY-ST-ZIP	
TITLE	DVAS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARLILE, THOMAS	5.2 NAME	
STREET ADDRESS	1111 W JEFFERSON ST	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOISE ID	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 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.

SIGNATURE: **X**  **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
APR 18 1997 204/384-7920
Date Daytime Phone #

CR2E034 (9/96)

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CUBAN ELECTRIC COMPANY
13-5601102 164
OFFICERS AND DIRECTORS

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INITIALS ARE LEGAL NAME.

DIRECTORS

07/18/94 THOMAS E. CARLILE
DIRECTOR
SSN=519-62-5419

OFFICE: 1111 W. JEFFERSON STREET
P.O. BOX 50
BOISE, ID 83728

RESIDENCE: 4341 WEST QUAIL POINT COURT
BOISE, ID 83703

07/18/94 THEODORE CRUMLEY
DIRECTOR
SSN=518-50-6278

OFFICE: 1111 W. JEFFERSON STREET
BOISE, IDAHO 83728

RESIDENCE: 3314 S TERRA DRIVE
BOISE, IDAHO 83709

11/01/84 IRVING LITTMAN
DIRECTOR
SSN=524-46-9761

OFFICE: 1111 W. JEFFERSON STREET
BOISE, ID 83728

RESIDENCE: 760 HARCOURT ROAD
BOISE, ID 83702

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OFFICERS AND DIRECTORS

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INITIALS ARE LEGAL NAME.

DATE OF
ELECTION

OFFICERS

IRVING LITTMAN

OFFICE: 1111 W. JEFFERSON STREET
BOISE, ID 83728

07/18/94 SSN=524-46-9761
CHAIRMAN/PRESIDENT

RESIDENCE: 760 HARCOURT ROAD
BOISE, ID 83702

07/18/94 VINCENT T. HANNITY
07/18/94 VICE PRESIDENT
07/18/94 SECRETARY

OFFICE: 1111 W. JEFFERSON STREET
BOISE, ID 83728

SSN=537-40-7435

RESIDENCE: 570 TROUTNER WAY
BOISE, ID 83712

07/18/94 THEODORE CRUMLEY
07/18/94 VICE PRESIDENT
07/18/94 TREASURER

OFFICE: 1111 W. JEFFERSON STREET
BOISE, IDAHO 83728

SSN=518-50-6278

RESIDENCE: 3314 S TERRA DRIVE
BOISE, IDAHO 83709

07/18/94 THOMAS E. CARLILE
07/18/94 VICE PRESIDENT
07/18/94 ASSISTANT SECRETARY

OFFICE: 1111 W. JEFFERSON STREET
P.O. BOX 50
BOISE, ID 83728

SSN=519-62-5419

RESIDENCE: 4341 WEST QUAIL POINT COURT
BOISE, ID 83703

07/22/86 E. A. FLACKER
07/22/86 ASSISTANT TREASURER
07/22/86 VICE PRESIDENT

OFFICE: 1111 W. JEFFERSON STREET
BOISE, ID 83728

SSN=517-50-8341

RESIDENCE: 804 CURLING DRIVE
BOISE, ID 83702