

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000008692

**Entity Name:** FPL SERVICES, LLC

**Current Principal Place of Business:**

700 UNIVERSE BLVD  
JUNO BEACH, FL 33408

**Current Mailing Address:**

700 UNIVERSE BLVD  
JUNO BEACH, FL 33408

**FEI Number:** 02-0600532

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEON, J.E.  
4200 WEST FLAGLER STREET  
SUITE 2123  
MIAMI, FL 33134 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name FPL ENERGYSYS, INC.  
Address 700 UNIVERSE BLVD  
City-State-Zip: JUNO BEACH FL 33408

Title P  
Name FORREST, SAM A  
Address 700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title VP  
Name NOBLE, REX E  
Address 700 UNIVERSE BLVD  
City-State-Zip: JUNO BEACH FL 33408

Title T  
Name CUTLER, PAUL I  
Address 700 UNIVERSE BLVD  
City-State-Zip: JUNO BEACH FL 33408

Title S  
Name SEELEY, W SCOTT  
Address 700 UNIVERSE BLVD  
City-State-Zip: JUNO BEACH FL 33408

Title VICE PRESIDENT AND GENERAL  
MANAGER  
Name RICE, TROY W  
Address 700 UNIVERSE BLVD  
City-State-Zip: JUNO BEACH FL 33408

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** W. SCOTT SEELEY

**SECRETARY**

**04/22/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date