

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500007129

**Entity Name:** CEDAR BAY COGENERATION, LLC

**Current Principal Place of Business:**

700 UNIVERSE BLVD.  
JUNO BEACH, FL 33408

**FILED**  
**Apr 26, 2016**  
**Secretary of State**  
**CC8078308604**

**Current Mailing Address:**

700 UNIVERSE BLVD.  
ATTN: CORPORATE GOVERNANCE  
JUNO BEACH, FL 33408 US

**FEI Number: 94-3391631**

**Certificate of Status Desired: No**

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

LEON, J.E.  
4200 W. FLAGLER ST  
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 P  
Name ARECHABALA, MIGUEL  
Address 700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title VP  
Name ACARI, CRAIG W  
Address 700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title VP  
Name RICE, TROY W  
Address 700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

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

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

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

Title ASSISTANT TREASURER  
Name PORTALES, ALDO  
Address 700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title ASSISTANT TREASURER  
Name BALZANO, JOSEPH  
Address 700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

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*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: MELISSA A. PLOTSKY**

**ASSISTANT SECRETARY 04/26/2016**

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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title ASSISTANT SECRETARY  
Name PLOTSKY, MELISSA A  
Address 700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408