## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT #731236**

1. Entity Name

FLORIDA ELECTRIC POWER COORDINATING GROUP,



Principal Place of Business

1408 N. WESTSHORE BLVD.

SUITE 1002 TAMPA, FL 33607 Mailing Address

1408 N. WESTSHORE BLVD. SUITE 1002 TAMPA, FL 33607

## FILED Apr 26, 2006 8:00 am Secretary of State

04-26-2006 90210 008 \*\*\*\*61.25

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04192006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 59-1488248 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

(813) 289-5644

6.	Name and	d Address	of Current	Registered Agent

WILEY, JAMES K. 1408 N. WESTSHORE BLVD. SUITÉ 1002 TAMPA, FL 33607

**SIGNATURE** 

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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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Financ     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIRE	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASTD WILEY, JAMES K. 1408 N. WESTSHORE BLVD STE. TAMPA, FL 33607	1002	-					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC MIDULLA, RICHARD J 16313 N DALE MABRY HWY. TAMPA, FL 33613							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC OLIVERA, ARMANDO 9250 W FLAGER MIAMI, FL 33174		DO NOT WRITE IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DICKENSON, JIM 21 W. CHURCH STREET, 17 6TH FL JACKSONVILLE, FL 322023105	OOR						
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP				. :				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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.								