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FILED
May 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **829037** **(1)**

1. Corporation Name
BECHTEL POWER CORPORATION

Principal Place of Business	Mailing Address
50 BEALE STREET **SAN FRANCISCO CA 94105**	**50 BEALE STREET** **SAN FRANCISCO CA 94105**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/20/1972**

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: **94-2173840** ☐ 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 or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ 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 **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 _____ (NOTE: Registered Agent signature required when reinstating) DATE

Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BECHTEL, RP		1.2 NAME		
STREET ADDRESS	50 BEALE ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO, CA 00000		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ZACCARIA, A		2.2 NAME		
STREET ADDRESS	50 BEALE ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO, CA 00000		2.4 CITY-ST-ZIP		
TITLE	SVP	☐ DELETE	3.1 TITLE	EVP	☒ Change ☐ Addition
NAME	CARTER, JD		3.2 NAME	CARTER, JD	
STREET ADDRESS	50 BEALE ST		3.3 STREET ADDRESS	50 BEALE ST.	
CITY-ST-ZIP	SAN FRANCISCO, CA 00000		3.4 CITY-ST-ZIP	SAN FRANCISCO, CA. 94105	
TITLE	D	☐ DELETE	4.1 TITLE	PD	☒ Change ☐ Addition
NAME	GUNTHER, D. J.		4.2 NAME	GUNTHER, D.J.	
STREET ADDRESS	50 BEALE ST		4.3 STREET ADDRESS	50 BEALE ST.	
CITY-ST-ZIP	SAN FRANCISCO CA		4.4 CITY-ST-ZIP	SAN FRANCISCO, CA. 94105	
TITLE	V	☐ DELETE	5.1 TITLE	VP	☒ Change ☐ Addition
NAME	BECKMAN, A.K.		5.2 NAME	BECKMAN, A.K.	
STREET ADDRESS	50 BEALE ST		5.3 STREET ADDRESS	50 BEALE ST.	
CITY-ST-ZIP	SAN FRANCISCO CA		5.4 CITY-ST-ZIP	SAN FRANCISCO, CA. 94105	
TITLE	VPT	☐ DELETE	6.1 TITLE	SVPD	☒ Change ☐ Addition
NAME	UNRUH, V. P.		6.2 NAME	UNRUH, V.P.	
STREET ADDRESS	50 BEALE ST		6.3 STREET ADDRESS	50 BEALE ST.	
CITY-ST-ZIP	SAN FRANCISCO, CA 00000		6.4 CITY-ST-ZIP	SAN FRANCISCO, CA. 94105	

CR2E034 (10/97)

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.

M.E. MARTELLO
Assistant Controller