

FILE NOW: FILING FEE IS \$61.25 -

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 853973 (6) 1. Corporation Name Electrical Generating Systems Association, Inc.			
Principal Place of Business 10251 W. Sample Road Suite B Coral Springs, FL 33065 US		Mailing Address 10251 W. Sample Road Suite B Coral Springs, FL 33065 US	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	09/03/1982	04/05/1995
22. City & State	27. City & State	4. FEI Number	Applied For
23. Zip	28. Zip	59-2270591	Not Applicable
24. Country	29. Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25. Country	30. Country	xx	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Kellough, David 10251 W. Sample Road Suite B Coral Springs, FL 33065		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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.			
SIGNATURE _____ (Signature typed or printed name of registered agent and filed if applicable) (NOTE: Registered Agent signature required when reappointing) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	C	☒ DELETE	
NAME	Burchette, Glynn		
STREET ADDRESS	5415 Charlottesville Rd.		
CITY, ST, ZIP	Springfield, VA		
TITLE	P	☒ DELETE	
NAME	Panetta, Don		
STREET ADDRESS	P.O. Box 631-St. Rd. 93 N. Ann Sutton Rd.		
CITY, ST, ZIP	Logan, OH		
TITLE	ED	☐ DELETE	
NAME	Kellough, David		
STREET ADDRESS	10251 W. Sample Rd., Suite B		
CITY, ST, ZIP	Coral Springs, FL		
TITLE	ST	☐ DELETE	
NAME	Rogers, Jack		
STREET ADDRESS	3131 S. Sheridan		
CITY, ST, ZIP	Tulsa, OK		
TITLE	VP	☐ DELETE	
NAME	Winbery, John		
STREET ADDRESS	22261 S. Lane		
CITY, ST, ZIP	Mandeville, LA		
TITLE		☐ DELETE	
NAME			
STREET ADDRESS			
CITY, ST, ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	S/T/D	☐ Change ☒ Addition	
1.2 NAME	Becker, Donald		
1.3 STREET ADDRESS	444 Highland Drive		
1.4 CITY, ST, ZIP	Kohler, WI 53044		
2.1 TITLE	V/D	☐ Change ☒ Addition	
2.2 NAME	Seftick, Ronald		
2.3 STREET ADDRESS	830 W. 40th Street		
2.4 CITY, ST, ZIP	Chicago, IL 60609		
3.1 TITLE	M	☒ Change ☐ Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY, ST, ZIP	33065		
4.1 TITLE	D	☒ Change ☐ Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY, ST, ZIP	74145-1168		
5.1 TITLE	P/D	☒ Change ☐ Addition	
5.2 NAME			
5.3 STREET ADDRESS	1695 South Lane		
5.4 CITY, ST, ZIP	70471		
6.1 TITLE	D	☐ Change ☒ Addition	
6.2 NAME	Gawlowski, Roman		
6.3 STREET ADDRESS	13400 Outer Drive, West		
6.4 CITY, ST, ZIP	Detroit, MI 48239-4001		
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: <i>David L. Kellough</i>		April 18, 1996 (954) 755-2677	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone	
David L. Kellough			

CR2E037 (12/95)