750-5578

FILED

## 2002 Uniform Business Report (UBR)

SIGNATURE:

## Apr 11, 2002 8:00 am Secretary of State **DOCUMENT # 853973** 1. Entity Name 04-11-2002 90677 037 \*\*\*\*70 00 ELECTRICAL GENERATING SYSTEMS ASSOCIATION, INC. Principal Place of Business Mailing Address 1650 S. DIXIE HWY. 1650 S. DIXIE HWY. 5TH FLOOR 5TH FLOOR **BOCA RATON FL 33432 BOCA RATON FL 33432** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2270591 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KELLOUGH, DAVID 1650 S DIXIE HWY FTH FLOOR City Zip Code **BOCA RARTON FL 33432** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete (9/01 TITLE TITLE Kellough, Jalane KELLOUGH, DAVID NAME NAME S DIFIE Itu 1650 1650 S<sup>‡</sup>DIXIE HWY, 5TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP ☐ Defete TITLE TITLE Gears Charlle 16504 De Zavala GEARS, CHARLIE NAME NAME STREET ADDRESS Galena RD. at S.R. 29 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MOSSVILLE IL 61552-0610 Delete TITLE Addition TITLE D KIDWELL, GARY NAME NAME STREET ADDRESS STREET ADDRESS 2291 W MARCH LANE STE A200 CITY-ST-ZIP CITY-ST-ZIP STOCKTON CA 95207 VĎ ☐ Addition TITLE ☐ Delete NAME: STOYANAC. STEVE - ------NAME ... STOYPAC 5110 E STREET ADDRESS STREET ADDRESS 5723 EAST ALKI SPOKANE WA 99211-0245 CITY-ST-7IP mead CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE LEBLANC, LEE NAME NAME STREET ADDRESS STREET ADDRESS 125 LIBBY LN. CITY-ST-ZIP CITY-ST-ZIP MOODY ME 04054-0079 WARRY OF THE TITLE らてひ ☐ Change Addition ☐ Delete TITLE Kacvinsky NAME Rand STREET ADDRESS STREET ADDRESS Wausau CITY-ST-ZIP 12. 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 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 is changed, or on an attachment with an address, with all other like empowered.