2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Apr 06, 2006 08:00 AM Secretary of State

DOC	111M	ENT	# A	314	440
		crva	TT / 1		フマン

1. Entity Name CEDAR BAY GENERATING COMPANY, LIMITED PARTNERSHIP



Principal Place of Business 9405 ARROWPOINT BLVD CHARLOTTE, NC 28273-8110 Mailing Address

9405 ARROWPOINT BLVD CHARLOTTE, NC 28273-8110



DO NOT WRITE IN THIS SPACE

52-1791289

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of	changing its registered office or register	red 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 epplicable

DATE

FILE NOWIN FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION P33621 DOCUMENT # CEDAR BAY COGENERATION, INC. NAME STREET ADDRESS 9405 ARROWPOINT BLVD ENTY-ST-ZIP CHARLOTTE, NC 282738110 F93000001526 DOCUMENT F NAME CEDAR II POWER CORPORATION STREET ADDITESS 9405 ARROWPOINT BOULEVARD CITY-ST-ZIP CHARLOTTE, NC 282738110 DOCUMENT # STREET ADDRESS C)TY-ST-ZIP OCCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

U00000494919 04/20/06-80061-025 500.00

DO NOT WRITE IN THIS SPACE

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under path; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SHATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

Thomas J. Bonner

April 5, 2004

(704) 525- 3800

Daytime Phone #