## 2006-LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2006

## May 01, 2006 08:00 Al Secretary of State DOCUMENT # B0400000240 MULBERRY POWER HOLDINGS LP Mailing Address Principal Place of Business 115 W. JEFFERSON ROAD 16945 NORTHCHASE DR, STE 1560 WHIPPANY NJ 07981 HOUSTON TX 77060 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE... CR2E003 (10/05) City & State City & State 4. FEI Number Applied For 20-0871196 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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, typed or printed name of registored agent and little if applicable. FILE NOW!!! Fee is \$500. \*\*\* After May 1, 2006, fee will be \$900. \*\*\* Make check payable to Florida Department of State. 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 13. ADDRESS CHANGES ONLY U00000554599 DOCUMENT # M04000002214 STREET ADDRESS NAME ARROYO POWER GP HOLDINGS LLC 05/15/06-80094-025\_500.00 STREET ADDRESS 16945 NORTHCHASE DR, STE 1560 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77060 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-782 CITY - ST - ZIP **COCUMENT #** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP. CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS City, St. 792 CITY-ST-ZIP DOCHMENT # STREET ADDRESS MAMAS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 oath; 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

David T. Field

SIGNATURE:

FILED