## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

444 MARKET STREET, 19 FLOOR

SAN FRANCISCO CA 94111-5325

**PROFIT CORPORATION** ANNUAL REPORT

1997

Principal Place of Business

NAME

STREET ADDRESS

SIGNATURE:

appears in Block 12 6/ Block

if changed, or

444 MARKET STREET, 19 FLOOR SAN FRANCISCO CA 94111



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F93000001368 (0)

## PG&E OPERATING SERVICES COMPANY

3a. Date of Last Report 3. Date Incorporated or Qualified 03/16/1993 04/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 94-3096158 26 Not Applicable Suite, Apt. #, etc. Suite Apt #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Zιρ Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 R4 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Asst. Secretary Change Addition 1 S TITLE BH Tracy C. Allen DISTEFANO, TONY F. 1.2 NAME NAME 444 Market Street, Ste. 1900 444 MARKET STREET, SUITE 1900 13 STREET ADDRESS STREET ADDRESS San Francisco. CA 94111 SAN FRANCISCO CA 14 City-St-ZiP CITY - ST - ZIP DELETE Change \_\_\_ Addition THLE 21 TITLE JOHNSON, MARILYN D 2.2 NAME NAME 444 MARKET ST, 19TH FL STREET ADDRESS 2.3 STREET ADDRESS SAN FRANCISCO CA 2. 4 CITY - ST - ZIP CHY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE TASD BOOTH, STUART W 3.2 NAME NAME 444 MARKET ST., 19TH FLOOR 3.3 STREET ADDRESS STREET ADDRESS SAN FRANCISCO CA 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change \_\_ Addition  $\Pi\Pi$ 4.1 TITLE NAME Jones, Richard C 4. 2 NAME 444 MARKET ST., 19TH FLOOR 4.3 STREET ADDRESS STREEL ADDRESS SAN FRANCISCO CA 94111 CITY-ST-7P 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIF Change DELETE Addition 6 1 TITLE TITUE

6.2 NAME

**6.3 STREET ADDRESS** 64 CITY-ST-ZIP 14. I do hereby certify that the information superied with the 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 comporation or this ecceiver of trusting employees do execute this report as required by Chapter 607, Florida Statutes; and that my name

Tracy C. Allen

(415)

291-6400