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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300005905 (5)

PELICAN POWER CORPORATION

| Principal Pia | ace of Business | Mailing Address | Mailing Address | | | f IBorida ling ibraft seite MBitt Matt amir antit Adim: acten imtel daile aufe imm. | | | |
|--|---|------------------------------|------------------------------------|--------------------|---------------------------------------|---|---------------------------------------|--------------------------|-------------|
| 444 MARKET ST. | | 444 MARKET ST. SUITE 1900 | | | | | | | |
| SUITE 1900 SAN FRANC | CISCO CA 94111 | SAN FRANCISCO CA | 94111-5330 | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 12/28/1993 | | ite of Last F 01/1996 | Report |
| 2. Principal | l Place of Business | 2a. Mailing Address | | | | 4. FEI Number | <u> </u> | | oplied For |
| 21 | | 26 | 26] | | | 94-3144069 Not Applicable | | | |
| Suite, Ar | ot #, e tc. | Suito, Apt #, etc | Suite, Apt #, etc. 27 City & State | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be | | | |
| City & St | tate | City & State | | | | | | | |
| 23 | | 28 | | | | Trust Fund Contribution | | | to Fees |
| Zip | Country | Zip | ├ ─¬ | intry | | 8. This corporation has liability for | | | i. 199.032, |
| 24 | 25 29 30 9. Name and Address of Current Registered Agent | | | 30 | | Florida Statutes Yes No 10, Name and Address of New Registered Agent | | | |
| | | rent Registered Agent | | B1 N | Name | 10. Name and Address of New Re | gistered | Agent | |
| _ | T CORPORATION SYSTEM | | | ן יים | vame | | | | |
| 1200 S. PINE ISLAND RD. PLANTATION FL 33324 | | | | 82 9 | Street Addr | et Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | 83 | | | | | |
| | | | | 84 (| City | | | 85 Zip | Code |
| | | | | | • | | FL | | |
| agent SIGNATURI | | | | | | poration submits this statement for the ion's board of directors. I hereby accended when reinstating) | DATE | | |
| 12. | OFFICERS AND DIRECTORS | | | | · · · · · · · · · · · · · · · · · · · | ADDITIONS/CHANGES TO OFFI | CERS AND | DIRECTO | RS IN 12 |
| TITLE | PCD | DELETI | 1.1 Ti | TLE | A | sst. Secretary | | ☐ Change | K Addition |
| NAME | DISTEFANO, TONY | | 1.2 N | AME | Ţ | racy C. Allen | | | |
| STREET ADORES | STREET ADDRESS 444 MARKET STREET, SUITE 1900 | | | 1.3 STREET ADDRESS | | 444 Market Street, Suite 1900 | | | |
| CITY-ST-Z# | SANFRANCISCO FL | | 1.4 0 | TY-ST-Z | IP S | an Francisco, CA 941 | 11 | | |
| TITLE | VTD | DELETI | 2.1 T | TLE | | | | Change | Addition |
| NAME | BOOTH, STUART W | | 2.2 N | AME | 1 | | | | |
| STREET ADDRES | | | 235 | FREET AD | ORESS | | | | |
| COTY - ST - ZIP | SAN FRANCISCO CA 9411 | | | ITY-ST- | ZIP | · · · · · · · · · · · · · · · · · · · | | | |
| TITLE | 8 | DELETI | 3.11 | TLE | ļ | | | Change | Addition |
| NAME | JONES, RICHARD C | | 3.2 N | AME | | | | | |
| STHEET ADDRES | | | 3.3 S | TAEET AD | DRESS | | | | |
| CHY-SI-7IP | SAN FRANCISCO CA 9411 | | | ITY-\$T- | ZIP | | · · · · · · · · · · · · · · · · · · · | - | |
| TOLE | C COMMON MARKET | DELETI | | | | | | Change | Addition |
| NAME | JOHNSON, MARILYN D. | TC 4000 | 4.21 | | | | | | |
| STREET ADDRES | | IE 1900 | - 4 | TREET AD | 1 | | | | |
| City-St-7iF | SAN FRANCISCO CA | DELET | | ITY-ST-Z | ZIP | <u> </u> | | Change | Addition |
| TITLE | | | | | | | | L.J. Change | L) AUGINON |
| NAME | 20 | | 52 N | | | | | | |
| STREET ADDRES | 22.1 | | | IREET AD | | | | | |
| City-St-ZiP | | DELET | | TY-\$1-7 | OP | | | Change | Addition |
| | | | | | | | | | |

SIGNATURE:

appears in Block 12 or Bloc

TIFLE

NAME

STREET ADORESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

14. I do hereby certify that the information sufficied with this hing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

6.4 CITY - ST-ZIP

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 expectation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

(415) 291-6400

FILED

Apr 04 1997 8:00am

Secretary of State

- TOLING WA 1986 (O. 1886 A.A. SOLY (D. 1994 AND DAN CAMERA