

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

FILED
May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000005539
1. Corporation Name
PacifiCorp Power Marketing, Inc.

Principal Place of Business 700 NE Multnomah Suite 1600 Portland, OR 97232	Mailing Address c/o Sally Nofziger 700 NE Multnomah, #1600 Portland, OR 97232-4116
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business 700 NE Multnomah	2a. Mailing Address c/o Sally Nofziger	4. FEI Number 93-1177933	Applied For Not Applicable
Suite, Apt. #, etc. 1600	Suite, Apt. #, etc. 700 NE Multnomah, #1600	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State Portland, OR	City & State Portland, OR	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 97232	Country USA	29 Zip 97232-4116	30 Country USA

3. Date Incorporated or Qualified

7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**CT Corporation System
Registered Office
1200 South Pine Island Road
c/o CT Corporation System
Plantation, FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this report in the process 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 and by each of the appointees, as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Signature: _____ **Date:** _____

12. OFFICERS AND DIRECTORS **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE		Director	John A. Bohling
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		1.3 STREET ADDRESS	700 NE Multnomah, #1600
		1.4 CITY-ST-ZIP	Portland, OR 97232-4116
<input type="checkbox"/> DELETE		2.1 TITLE	Donald N. Furman
		2.2 NAME	President
		2.3 STREET ADDRESS	700 NE Multnomah, #1600
		2.4 CITY-ST-ZIP	Portland, OR 97232-4116
<input type="checkbox"/> DELETE		3.1 TITLE	SVP & COO
		3.2 NAME	Brian D. Sickels
		3.3 STREET ADDRESS	700 NE Multnomah, #1600
		3.4 CITY-ST-ZIP	Portland, OR 97232-4116
<input type="checkbox"/> DELETE		4.1 TITLE	Vice President
		4.2 NAME	Kimball R. Rasmussen
		4.3 STREET ADDRESS	825 NE Multnomah, #3000
		4.4 CITY-ST-ZIP	Portland, OR 97232
<input type="checkbox"/> DELETE		5.1 TITLE	Secretary
		5.2 NAME	Sally A. Nofziger
		5.3 STREET ADDRESS	700 NE Multnomah, #1600
		5.4 CITY-ST-ZIP	Portland, OR 97232-4116
<input type="checkbox"/> DELETE		6.1 TITLE	Treasurer
		6.2 NAME	William E. Peressini
		6.3 STREET ADDRESS	825 NE Multnomah, #1900
		6.4 CITY-ST-ZIP	Portland, OR 97232

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.07(3)(b), 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sally A. Nofziger* Sally A. Nofziger April 28, 1998 503 731 2144

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)