PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000005539

PACIFICORP POWER MARKETING, INC.

Principal Pla	ace of Business	Mailing Address				
700 NE MULTNOMAH ST., STE, 1600 PORTLAND OR 97232		C/O SALLY NOFZIGER 700 NE MULTNOMAH. #1600				
		PORTLAND OR 97232-4116		DO NOT WRITE IN TH	IS SPACE	
		U\$		3. Date Incorporated or Qualifed		
[10/21/1997		
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Appli	ed For
21 825	NE Multnomah	26 825 NE Mult	nomah	93-1177933	Not A	Applicable
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired	\$8.75 Add	
22 600		27 Ste 2000 A	ttn LMa		Fee Requ	ired
City & St	ate	City & State		6 Election Campaign Financing	\$5.00 M	ау Ве
	land, Oregon	Portland, O	regon	Trust Fund Contribution	Added to I	·
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	
	232 ₂₅ USA	29 97232 30	USA	Personal Property Tax.]No
24 3,	9. Name and Address of Current	1201	,,	10. Name and Address of New Registere	d Agent	
}	5. Name and Address of Carlon	1.09.01.01	81 Name			
C	T CORPORATION SYSTEM					
1200 SOUTH PINE ISLAND ROAD			82 Street A	Address (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324			83			
'-	, 4(//() 4 1 2 3 3 2 1		05			
			84 City	F	85 Zip Co	de
		-		-		-intered
11. Pursua	nt to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named o	corporation submits this statement for the purpose ration's board of directors. I hereby accept the app	or changing its re pointment as regis	stered
agent. 1	am familiar with, and accept the obligati	ons of, Section 607.0505, Florida	a Statutes.	nation of board of directors. The body decoupt and app		
SIGNATUR						
SIGNATOR	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent signature re			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	△ DELETE	1.1 TITLE	P/VP	Change	Addition
NAME	BOHLING, JOHN A		1.2 NAME	Barbara J. Cronise	600	
STREET ADDRES	ss 700 NE MULTNOMAH ST., STE.	1600	1.3 STREET ADDRESS	825 NE Multnomah, Ste	600	
CITY+ST-ZIP	PORTLAND OR 97232-4116		1.4 CITY-ST-ZIP	Portland, OR 97232		
TITLE	SVP	☐ DELETE	2.1 TITLE	D/P. then,		☐ Addition
NAME	SICKELS, BRIAN D		2.2 NAME	Brian D. Sickels	-	
STREET ADDRES	TOO ALE AND THIOMAN OF OTE	1600	2.3 STREET ADDRESS	825 NE Multnomah, Ste	600	
CITY-ST-ZIP	PORTLAND OR 97232-4116		2. 4 CITY-ST-ZIP	Portland, OR 97232		
TITLE	VP	₩ DELETE	3.1 TITLE	VP	☐ Change	Addition
	RASMUSSEN, KIMBALL R	M	3.2 NAME	Aram G. Sogomonian		••
NAME	COS NEC AND THICKERS OF CITE	200	3.3 STREET ADDRESS		600	
STREET ADORE		JUU		825 NE Multnomah, Ste	000	
CITY-ST-ZIP	PORTLAND OR 97232	☐ DELETE	3.4. CITY-ST-ZIP	Portland, OR 97232	Change	Addition
TITLE	S SALLY A	☐ ÚELETE		Benome M. Mostin	ET CHOIGE	
NAME	NOFZIGER, SALLY A		4. 2 NAMÉ	825 NE Multnomah, Ste	2000	
STREET ADDRE		1600	4.3 STREET ADDRESS		2000	
CITY-ST-ZIP	PORTLAND OR 97232		4.4 CITY-ST-ZIP	Portland, OR 97232		
	T T	□ DELETE	CATTE C		[☑] Change	☐ Addition

14. I hereby certify that the information supplied with this 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 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, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

D/CEO

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TILE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

PERESSINI, WILLIAM E

PORTLAND OR 97232

FURMAN, DONALD N

825 NE MULTNOMAH, #1600

700 NE MULTNOMAH ST., STE. 1600

DELETE

4/29/99

825 NE Multnomah, Ste 1900

825 NE Multnomah, Ste 2000

Richard T. O'Brien

5<u>03 813 7209</u>

☐ Change

Addition

FILED

Secretary of State

05-04-1999 90016 012 ***150.00

May 04, 1999 8:00 am

PacifiCorp Power Marketing Officers & Directors

OFFICERS

∠Cronise, Barbara J., Vice President
825 NE Multnomah, Suite 600, Portland, OR 97232

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Dalley, Robert R., Controller 825 NE Multnomah, Suite 2000, Portland, OR 97232

Fryer, John F., Assistant Treasurer 825 NE Multnomah, Suite 1900, Portland, OR 97232

Martin, Lenore M., Assistant Secretary 825 NE Multnomah, Suite 2000, Portland, OR 97232

Nofziger, Sally A., Secretary 825 NE Multnomah, Suite 2000, Portland, OR 97232

O'Brien, Richard T., Chairman of the Board 825 NE Multnomah, Suite 2000, Portland, OR 97232

Pendergraft, J. T., Assistant Secretary 825 NE Multnomah, Suite 1900, Portland, OR 97232

Peressini, William E., Treasurer 825 NE Multnomah, Suite 1900, Portland, OR 97232

Sickels, Brian D., President and Chief Operating Officer 825 NE Multnomah, Suite 600, Portland, OR 97232

Sogomonian, Aram G., Vice President 825 NE Multnomah, Suite 600, Portland, OR 97232

Williams, Bruce N., Assistant Treasurer 825 NE Multnomah, Suite 1900, Portland, OR 97232

DIRECTORS

✓ Barbara J. Cronise
825 NE Multnomah, Suite 600, Portland, OR 97232

Richard T. O'Brien 825 NE Multnomah, Suite 2000, Portland, OR 97232

William E. Peressini 825 NE Multnomah, Suite 1900, Portland, OR 97232

✓Brian D. Sickels 825 NE Multnomah, Suite 600, Portland, OR 97232