

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

062124 AT

DOCUMENT # F99000003071

1. Entity Name  
OKEECHOBEE POWER CORPORATION



FILED

03 FEB 20 PM 12:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
7500 OLD GEORGETOWN ROAD 13TH FLOOR  
BETHESDA MD 20814

Mailing Address  
7500 OLD GEORGETOWN ROAD 13TH FLOOR  
BETHESDA MD 20814

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 52-2173677

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Delete  
NAME IRIBE, P. CHRISMAN  
STREET ADDRESS 7500 OLD GEORGETOWN ROAD 13TH FLOOR  
CITY-ST-ZIP BETHESDA MD 20814

TITLE DP ☒ Change ☐ Addition  
NAME Lyndell E. Maddox  
STREET ADDRESS 7500 Old Georgetown Road, 13th Floor  
CITY-ST-ZIP Bethesda MD 20814-6161

TITLE DS ☐ Delete  
NAME HARTMAN, SANFORD L  
STREET ADDRESS 7500 OLD GEORGETOWN ROAD 13TH FLOOR  
CITY-ST-ZIP BETHESDA MD 20814

TITLE ☒ Change ☐ Addition  
NAME John R. Cooper  
STREET ADDRESS 7500 Old Georgetown Road, 13th Floor  
CITY-ST-ZIP Bethesda MD 20814-6161

TITLE VP ☐ Delete  
NAME COOPER, JOHN R  
STREET ADDRESS 7500 OLD GEORGETOWN ROAD 13TH FLOOR  
CITY-ST-ZIP BETHESDA MD 20814

TITLE AC ☐ Change ☒ Addition  
NAME Mark T. Caron  
STREET ADDRESS 7500 Old Georgetown Road, 13th Floor  
CITY-ST-ZIP Bethesda, MD 20814-6161

TITLE T ☒ Delete  
NAME BASSETT, DAVID N  
STREET ADDRESS 7500 OLD GEORGETOWN ROAD 13TH FLOOR  
CITY-ST-ZIP BETHESDA MD 20814

TITLE VP ☒ Change ☐ Addition  
NAME P. Chrisman Iribe  
STREET ADDRESS 7500 Old Georgetown Road, 13th Floor  
CITY-ST-ZIP Bethesda, MD 20814-6161

TITLE V ☒ Delete  
NAME FEYDER, F. J  
STREET ADDRESS 7500 OLD GEORGETOWN ROAD 13TH FLOOR  
CITY-ST-ZIP BETHESDA MD 20814

TITLE ☐ Change ☐ Addition  
NAME 600012980888  
STREET ADDRESS 02/24/03--01016--009 \*\*3162.50  
CITY-ST-ZIP

TITLE V ☒ Delete  
NAME QUINN, WILLIAM F  
STREET ADDRESS 7500 OLD GEORGETOWN ROAD 13TH FLOOR  
CITY-ST-ZIP BETHESDA MD 20814

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK T. CARON REQUIRED ASST. CONTROLLER 1/30/03 301-280-6800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)