

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006063

1. Entity Name

ENRON COMMUNICATIONS LEASING CORP.

**FILED**  
**May 30, 2000 8:00 am**  
**Secretary of State**

05-30-2000 90085 036 \*\*\*150.00

Principal Place of Business

Mailing Address

210 S.W. MORRISON STREET, SUITE 400  
 PORTLAND OR 97204

210 S.W. MORRISON STREET, SUITE 400  
 PORTLAND OR 97204

2. Principal Place of Business

2100 SW River Pkwy

3. Mailing Address

2100 SW River Parkway

Suite, Apt. #, etc.

800

Suite, Apt. #, etc.

40 Corporate Tax - Stk. 600

City & State

Portland, Oregon

City & State

Portland, OR ~~97204~~

Zip

97201

Country

USA

Zip

97201

Country

USA

4. FEI Number

76-0611232

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C-T-CORPORATION-SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324

Name

Street Address (P.O. Box Numbers 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RICE, KENNETH D 1400 SMITH STREET HOUSTON TX 77002	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DAVIS, ANGUS H 1400 SMITH STREET HOUSTON TX 77002	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERMANN, ROBERT J. 1400 SMITH STREET HOUSTON TX 77002	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEATHERWOOD, DAVID M 1400 SMITH STREET HOUSTON TX 77002	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT MCMAHON, JEFFREY 1400 SMITH STREET HOUSTON TX 77002	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS MENCHACA, PEGGY B 1400 SMITH STREET HOUSTON TX 77002	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David M. DeGabriele (Asst. Treas.)

Date

5/15/00

Daytime Phone #

(503) 886-0160

CR2E034 (9/99)