

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J74330 (8)

1. Corporation Name

TECO POWER SERVICES CORPORATION

Principal Place of Business

C/O R.H. KESSEL
702 N. FRANKLIN ST.
TAMPA FL 33602-4418
US

Mailing Address

C/O R.H. KESSEL
P. O. BOX 111
TAMPA FL 33601-0111
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCDEVITT, S M
702 N FRANKLIN ST
TAMPA FL 33602

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DT	☐ DELETE
NAME	OAK, A.D.	
STREET ADDRESS	702 N. FRANKLIN STREET	
CITY-ST-ZIP	TAMPA FL	
TITLE	S	☐ DELETE
NAME	KESSEL, R H	
STREET ADDRESS	702 N. FRANKLIN STREET	
CITY-ST-ZIP	TAMPA FL	
TITLE	PD	☐ DELETE
NAME	LUDWIG, R.E.	
STREET ADDRESS	702 N. FRANKLIN STREET	
CITY-ST-ZIP	TAMPA FL	
TITLE	V	☐ DELETE
NAME	JENNINGS, G. D (JR)	
STREET ADDRESS	702 N FRANKLIN ST	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	☐ DELETE
NAME	GUZZLE, T.L.	
STREET ADDRESS	702 N. FRANKLIN ST.	
CITY-ST-ZIP	TAMPA FL	
TITLE	V	☐ DELETE
NAME	MILLER, L A	
STREET ADDRESS	702 N FRANKLIN ST	
CITY-ST-ZIP	TAMPA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/96

Date

(813)228-4218

Daytime Phone #

CR2E034 (12/95)