2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0000001560

Entity Name: SHADY HILLS POWER COMPANY, L.L.C.

FILED Mar 25, 2008 Secretary of State

14240 MERCHANT ENERGY WAY SHADY HILLS, FL 34610

Current Mailing Address: New Mailing Address:

120 LONG RIDGE ROAD 1155 PERIMETER CENTER WEST ATLANTA, GA 30338 ATTN: EFS LEGAL DEPT. STAMFORD, CT 06927

FEI Number: 04-3597389 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: **PRES** () Delete (X) Change () Addition DRISCOLL, ROBERT BOBER, JOHN Name: Name:

1155 PERIMETER CENTER WEST Address: 120 LONG RIDGE ROAD Address: City-St-Zip: ATLANTA, GA 30338 City-St-Zip: STAMFORD, CT 06927

(X) Change () Addition Title: MGR () Delete Title:

HOLDEN III, J W Name: BERGABO, BJORN Name: Address: 1155 PERIMETER CENTER WEST Address: 120 LONG RIDGE ROAD City-St-Zip: ATLANTA, GA 30338 City-St-Zip: STAMFORD, CT 06927

Title: MGR () Delete Title: (X) Change () Addition

HAYES, ROBERT A Name: WILLIAM, STEVENS M Name: 1155 PERIMETER CENTER WEST 120 LONG RIDGE ROAD Address: Address:

City-St-Zip: ATLANTA, GA 30338 City-St-Zip: STAMFORD, CT 06927

Title: () Delete Title: () Change (X) Addition

Name: Name: CHAUHAN, VIMAL 120 LONG RIDGE ROAD Address: Address:

City-St-Zip: City-St-Zip: STAMFORD, CT 06927

Title: () Delete Title: () Change (X) Addition

NAJARIAN, HAIG Name: Name: 120 LONG RIDGE ROAD Address: Address: City-St-Zip: City-St-Zip: STAMFORD, CT 06927

Title: () Delete Title: () Change (X) Addition

MATHEWS, KATHLEEN L Name: Name: Address: Address: 120 LONG RIDGE ROAD STAMFORD, CT 06927 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KATHLEEN L. MATHEWS 03/25/2008