

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M01000001290

1. Entity Nam

CITY-ST-ZIP

SIGNATURE:

AUBURNDALE PEAKER ENERGY CENTER, LLC



Principal Place of Business

SAN JOSE, CA 95113

C/O CALPINE CORPORATION 50 WEST SAN FERNANDO ST. Mailing Address

C/O CALPINE CORPORATION 50 WEST SAN FERNANDO ST. SAN JOSE, CA 95113

FILED May 23, 2007 08:00 A Secretary of State



05032007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number					
	77-0575632					

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agen	6	Š.	Name	and a	Address	of	Current	Reg	istered	Ag	ent
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CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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5/11/2007

Date

(408)995-5115

Daylune Phone #

the obligat	named entity submits this statement for the purpose of chan ions of registered agent.	ging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATH;
Fii Due I	ing Fee is \$50.00 by September 14, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CALPINE AUBURNDALE HOLDINGS, LLC 50 SAN FERNANDO ST SAN JOSE, CA 95113		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000765304 05/31/07-80032-025 50.00
NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 further certify that the information indicated on this report is true and accurate and that my 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Christopher Jaap