

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000404

FILED
Jul 07, 2008
Secretary of State

Entity Name: TERRA-GEN OPERATING COMPANY, LLC

Current Principal Place of Business:

C/O CAITHNESS CORPORATION
565 5TH AVENUE, 29TH FLOOR
NEW YORK, NY 10017

New Principal Place of Business:

C/O TERRA-GEN POWER, LLC
565 5TH AVENUE, 27TH FLOOR
NEW YORK, NY 10017

Current Mailing Address:

C/O CAITHNESS CORPORATION
565 5TH AVENUE, 29TH FLOOR
NEW YORK, NY 10017

New Mailing Address:

C/O TERRA-GEN POWER, LLC
565 5TH AVENUE, 27TH FLOOR
NEW YORK, NY 10017

FEI Number: 88-0462063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

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:

Title: MGRM () Delete
Name: TERRA-GEN OPERATING, HOLDINGS, LLC
Address: 565 5TH AVENUE, 29TH FLOOR
City-St-Zip: NEW YORK, NY 10017

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TERRA-GEN OPERATING, HOLDINGS, LLC
Address: 565 5TH AVENUE, 27TH FLOOR
City-St-Zip: NEW YORK, NY 10017

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: MICHAEL J. KOWAL

ASST

07/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date