

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # M54393

(7)

1. Corporation Name

ESI GEOTHERMAL II INC.

Principal Place of Business

**1400 CENTREPARK BLVD.
SUITE 600
W. PALM BCH. FL 33401**

Mailing Address

**1400 CENTREPARK BLVD.
SUITE 600
W. PALM BCH. FL 33401**

FILED
95 MAY -1 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/23/1987

3a. Date of Last Report

03/23/1994

4. FEI Number

59-2819451

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No **See Attached**

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LEON, J E
9250 WEST FLAGLER STREET
MIAMI FL 33174**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **CARPENTER, LARRY K.**
STREET ADDRESS **1400 CENTREPARK BLVD 600**
CITY - ST - ZIP **W. PALM BCH. FL**

1.1 TITLE **DV**
1.2 NAME **CARPENTER, LARRY K.**
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☒ Change ☐ Addition

TITLE **DV**
NAME **GELBER, LESLIE J**
STREET ADDRESS **1400 CENTREPARK BLVD., #600**
CITY - ST - ZIP **WEST PALM BEACH FL**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE **PD**
NAME **HOFFMAN, KENNETH P.**
STREET ADDRESS **1400 CENTREPARK BLVD 600**
CITY - ST - ZIP **W. PALM BCH. FL**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE **T**
NAME **BARNA, KENNETH G.**
STREET ADDRESS **1400 CENTREPARK BLVD., #600**
CITY - ST - ZIP **WEST PALM BEACH FL**

4.1 TITLE **T**
4.2 NAME **MCCRATH, ROBERT L.**
4.3 STREET ADDRESS **1400 CENTREPARK BLVD, STE 600**
4.4 CITY - ST - ZIP **WEST PALM BEACH FL**

☒ Change ☐ Addition

TITLE **S**
NAME **CARPENTER, FRANCES M.**
STREET ADDRESS **1400 CENTREPARK BLVD 600**
CITY - ST - ZIP **W. PALM BCH. FL**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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

FRANCES M. CARPENTER

SECRETARY

3/27/95

Date

407-687-4900

Daytime Phone #

MS4393

ATTACHMENT TO 1995 CORPORATION ANNUAL REPORT - FLORIDA

INTANGIBLE TAX IS PAID BY PARENT COMPANY, FPL GROUP, INC., FEI #59-2449419.