APPROVE.

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: Mark A Pyle SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, M. NAGER, OF AUTHORIZED REPRESENTATIVE

DOCU	IMENT# M97 (000000460			1	1 134 46 17			
1. Entity Name DIVERSIFIED ENERGY CONTRACTORS COMPANY, LLC					٠ [01 MAY -2 AM 10: 52			
DIVERSIF	TED ENERGY CONTRACT	IONS COMPAINT, LL	C			GEODETADY DE I	C-TATE		
						SECRETARY OF STATE AHASSEE, F	LORIDA		
Principal Plac	ce of Business	Mailing Address ,				IMEENIMOVEEN	- (
1616 WOODA	P.O. BOX 660164								
DALLAS TX 7	5202	DALLAS TX 75266	•						
							 		
2. Principal f	Place of Business	3. Mailing Address						(IXII 110 I 10	
		P.O. Box 1642	_ _			<u> </u>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	iuite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Sta Colum	bus, OH 43215	City & State Columbus, OH	ity & State Lumbus, OH 16428-0428			lumber 75-2715077		oplied For ot Applicable	
Zip	Country US	Zip	p Country US		5. Certi	ficate of Status Desired	\$5.00 Add	ditional	
·	6. Name and Address of Curre	ent Registered Agent			7 Nam	e and Address of New Registe	Fee Require	ed	
o. Name and Address of Current neglistered Agent				Name					
C T CORPORATION SYSTEM					Address (P.O. Box Number is Not Acceptable)				
1200 SOUTH PINE ISLAND ROAD				Street Address (F.O. Box Northogras Not Acceptable)					
PLANTATI	ON FL 33324								
				City			FL Zip Cod	e	
8. The above	named entity submits this statement	t for the purpose of changing i	ts registere	ed office o	r registered agent	or both, in the State of Florida			
	Trained driving describes	t tot the purpose of one igning t	ic oglotor	Ja 0,1100 0	ragiotoraa agant,	or both, in the otate of horizon.			
SIGNATURE	Signature, typed or printed name of registered ag	A46	-				DATE		
	Signature, typed or printed name of registered agr	ent and this it applicable, (NC	Hegistered	Ageni signat	ure required when rainstati		_ 	<u>_</u>	
			ı iliwkir	31	•	-05/23/01	011050		
		Make Check F	e vable to	o Depart	ment of State	*****50.0]() *****5	0.00	
9.	MANAGING MEN	MBERS/MEMBERS	10.	11		ADDITIONS/CHAI	NGES		
TITLE	MGRM	 ■ Delete	TITLE			utive Officer	Change	K Addition	
NAME	CSW ENERGY, INC. 1616 WOODALL RODGERS FR	PERMAY	NAM		John R. Jones Riverside Plaza				
STREET ADDRESS CITY-ST-ZIP	DALLAS TX 75202	ECWAT	•	et address -St-Zip	Columbus,				
TITLE		Delete	TITLE		Vice Pres		☐ Change	Addition	
NAME				Ē	Jeffrey D. Cross				
STREET ADDRESS				ET ADDRESS	l Riversio				
CITY-ST-ZIP				ST-ZIP	Columbus,			MT	
TITLE NAME		☐ Delete	TITLE		Leonard V		☐ Changé	Addition	
STREET ADDRESS				Et address	l Riversi	le Plaza			
CITY-ST-ZIP			CITY-	ST-ZIP	Columbus,	ОН 43215			
TITLE		☐ Delete	TITLE		Secretary		☐ Change	★ Addition	
name Street address			NAME	ET ADDRESS	Timothy A				
CITY-ST-ZIP	1			ST-ZIP	l Riversion Columbus,				
TITLE		☐ Delete	TITLE			Controller	☐ Change	★ Addition	
NAME			NAME		Mark A. Py	/le	-		
STREET ADDRESS				T ADDRESS	l Riversio				
CITY-ST-ZIP*				ST-ZIP	Columbus,		- Change	X Addition	
TITLE Name] Delete	TITLE Name		Assistant Geoffrey S		☐ Change	I▼1 vagariou	
STREET ADDRESS				T ADDRESS	1 Riversi				
CITY-ST-ZIP			CITY-	ST-ZIP	Columbus,		·		
11. I hereby o	ertify that the information supplied w on this report is true and accurate ar	with this filing does not qualify f	or the exer	nption stat	ted in Section 119.0	7(3)(i), Florida Statutes. I furthe	or certify that the in	nformation	
limited lial	oility company or the receiver or trust	tee empowered to execute this	report as	required b	by Chapter 608, Flo	rida Statutes.	J. I.D.O. G. Manage	, 3, 1, 2	