2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9400003529 15:Entity Name THE FLORIDA COMPETITIVE ENERGY PRODUCERS ASSOCIA				FILED Jun 01, 2000 8:00 am Secretary of State				
Principal Place of Business	Mailing Address	<u></u>	_	06-01-2000	90276 00:	5 ****61	.25	
117 S GADSDEN STREET     117 S GADSDEN ST       TALLAHASSEE FL 32301     TALLAHASSEE FL 3       US     US		25						
2. Principal Place of Business 3. Mailing Addres		dress						
Suite, Apt. #, etc.	Suite, Apt. #, etc.		-	DO NOT WRITE IN THIS SPACE				
City & State	City & State		4. FEI Number 59-3271777 Applied For Not Applicable					
Zip Country	Zip	Country	5. Certificate c	f Status Desired	\$	8.75 Add	itional	
6. Name and Address of Current	Registered Agent		7. Name and /	Address of New R				
		Name						
KAUFMAN, VICKI G 117 S. GADSDEN STREET		Street Addres	s (P.O. Box Number	is Not Acceptable	)			
TALLAHASSEE FL 32301		City				Zip Code	<u></u>	
		City		•	FL			
FILE NOW:     9. Election Campaign       FEE IS \$61.25     Trust Fund Contribut		ution. D Ad	6.00 May Be ded to Fees					
10. OFFICERS AND DI		11.	ADDITIONS/CHA	NGES TO OFFICE				
TITLE PD NAME HUDDLESTON, BARRY STREET ADDRESS 1000 LOUISIANA STREET, SUITE CITY-ST-ZIP HOUSTON TX 77002-5050	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE VD NAME KELLY, GREG STREET ADDRESS 75 14TH STREET SUITE 2400	Delete	TITLE NAME STREET ADDRESS				🗌 Change	Addition	
CITY-ST-ZIP ATLANTA GA 30309	Delete	CITY-ST-ZIP				Change	Addition	
NAME HUDDLESTON, BARRY- STREET ADDRESS 1000 LOUISIANA ST STE 2800 CITY-ST-ZIP HOUSTON TX 77002-5050	-	NAME STREET ADDRESS CITY-ST-ZIP						
TITLE STD NAME JOHNSON, JOHN STREET ADDRESS 75 14TH STREET, SUITE 2400	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				🗌 Change	Addition	
CITY-ST-ZIP ATLANTA GA 30309	Delete	TITLE NAME STREET ADDRESS	, ,, <b>,</b> <del>, , , , , , , , , , , , , , , , , , </del>			🗌 Change	Addition	
CITY-ST-ZIP		CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	🗌 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				onanys		
<ol> <li>I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee emp</li> </ol>	s true and accurate and that m	the exemption stated in signature shall have the	ne same legal effect	as if made under (	bath; that I an	n an officer	or director	
changed, or on an attachment with an address,	with all other like empowered.	as required by Chapter (	517, Florida Statutes	; and that my ham	e appears in	Block 10 or	BIOCK I ( IT	