

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P23440 (1)

1. Corporation Name
OXBOW GEOTHERMAL CORPORATION

Principal Place of Business

5250 S. VIRGINIA ST.
STE. #304
RENO NV 89502
US

Mailing Address

1601 FORUM PLACE
W. PALM BEACH FL 33401-6101
US



3. Date Incorporated or Qualified 03/16/1989
3a. Date of Last Report 02/28/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number 51-0271069
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

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

TITLE	CCEO	<input type="checkbox"/> DELETE
NAME	KOCH, WILLIAM I.	
STREET ADDRESS	1601 FORUM PLACE P-2	
CITY - ST - ZIP	W. PALM BCH FL	
TITLE	DCOP	<input type="checkbox"/> DELETE
NAME	CHERRY, BERNARD H.	
STREET ADDRESS	1601 FORUM PLACE P-2	
CITY - ST - ZIP	W. PALM BEACH FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	RUSH, BARNEY	
STREET ADDRESS	1601 FORUM PLACE, STE P-2	
CITY - ST - ZIP	WEST PALM BEACH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	CALLAHAN, RICHARD P.	
STREET ADDRESS	1601 FORUM PLACE P-2	
CITY - ST - ZIP	W. PALM BEACH FL 33401	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SHIPLEY, ZACHARY	
STREET ADDRESS	1601 FORUM PLACE P-2	
CITY - ST - ZIP	W. PALM BEACH FL 33401	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ZODIACO, VINCENT P	
STREET ADDRESS	1601 FORUM PLACE, STE. P-2	
CITY - ST - ZIP	WEST PALM BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Rohit C. Chib	
1.3 STREET ADDRESS	1601 Forum Place, P2	
1.4 CITY - ST - ZIP	West Palm Beach, FL 33401	
2.1 TITLE	Asst. Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	David W. Clark	
2.3 STREET ADDRESS	1601 Forum Place, Suite P2	
2.4 CITY - ST - ZIP	West Palm Beach, FL 33401	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Vincent P. Zodiaco	
6.3 STREET ADDRESS	5250 S. Virginia Street, Suite 304	
6.4 CITY - ST - ZIP	Reno, NV 89502	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Richard P. Callahan

Date

Daytime Phone #

2/10/97 561-697-4300

CR2E034 (9/96)