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Mar 02, 1999 8:00 am  
Secretary of State

03-02-1999 90188 033 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P23440

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 33401-8188  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/16/1989	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 51-0271069	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST STE 105 TALLAHASSEE FL 32301		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CCEO <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOCH, WILLIAM I.	1.2 NAME	
STREET ADDRESS	1601 FORUM PLACE P-2	1.3 STREET ADDRESS	
CITY-ST-ZIP	W. PALM BCH FL	1.4 CITY-ST-ZIP	
TITLE	DCOP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHERRY, BERNARD H.	2.2 NAME	
STREET ADDRESS	1601 FORUM PLACE P-2	2.3 STREET ADDRESS	
CITY-ST-ZIP	W. PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROHIT C CHIB	3.2 NAME	
STREET ADDRESS	1601 FORUM PLACE P2	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALLAHAN, RICHARD P.	4.2 NAME	
STREET ADDRESS	1601 FORUM PLACE P-2	4.3 STREET ADDRESS	
CITY-ST-ZIP	W. PALM BEACH FL 33401	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	Asst. Sec. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHIPLEY, ZACHARY	5.2 NAME	CLARK, DAVID W.
STREET ADDRESS	1601 FORUM PLACE P-2	5.3 STREET ADDRESS	1601 FORUM PLACE P2
CITY-ST-ZIP	W. PALM BEACH FL 33401	5.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZODIACO, VINCENT P	6.2 NAME	
STREET ADDRESS	5250 S VIRGINIA ST, SUITE 304--	6.3 STREET ADDRESS	9790 GATEWAY DR. #220
CITY-ST-ZIP	RENO NV -	6.4 CITY-ST-ZIP	RENO, NV

14. I 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, with all other like empowered.

SIGNATURE:  Richard P. Callahan

561-697-4300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)