

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P35875 (4)

1. Corporation Name

NCP LAKE POWER INCORPORATED



Principal Place of Business

ONE UPPER POND ROAD
% ENERGY INITIATIVES
PARSIPPANY NJ 07051
US

Mailing Address

ONE UPPER POND ROAD
% ENERGY INITIATIVES
PARSIPPANY NJ 07051
US

3. Date Incorporated or Qualified

10/11/1991

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

33-0505977

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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 of Registered Agent or Director (Required when changing agent)

Signature of Registered Agent (Required when not changing agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME LEVY, BRUCE
STREET ADDRESS ONE UPPER POND ROAD
CITY, ST, ZIP PARPAPPANY NJ 07051 ☐ DELETE

TITLE V
NAME BRAVER, DAVID C
STREET ADDRESS ONE UPPER POND ROAD
CITY, ST, ZIP PARPAPPANY NJ 07051 ☐ DELETE

TITLE S
NAME TOMBLIN, KELLY
STREET ADDRESS ONE UPPER POND ROAD
CITY, ST, ZIP PARPAPPANY NJ 07051 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP Business Development
1.2 NAME Richard J. Guy
1.3 STREET ADDRESS One Upper Pond Road
1.4 CITY, ST, ZIP Parsippany, NJ 07054 ☐ Change ☒ Addition

2.1 TITLE VP Business Operations
2.2 NAME John A. McTear
2.3 STREET ADDRESS One Upper Pond Road
2.4 CITY, ST, ZIP Parsippany, NJ 07054 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP ☐ Change ☐ Addition

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 registered 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

Kelly A. Tomblin

2/20/96

(201)263-6920

Office Phone

CR2E034 (12/95)