

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P36586

1. Entity Name

OXBOW POWER SERVICES, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90043 035 ***150.00

Principal Place of Business

5250 S. VIRGINIA ST
STE 304
RENO NV 89502
US

Mailing Address

1601 FORUM PL STE P-2
WEST PALM BEACH FL 33401-8101

00004110

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0206657

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALLAHAN, RICHARD P.
1601 FORUM PLACE
SUITE P-2
WEST PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DCOP	<input type="checkbox"/> Delete
NAME	CHERRY, BERNARD H.	
STREET ADDRESS	1601 FORUM PLACE STE. #P-2	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	EVP	<input checked="" type="checkbox"/> Delete
NAME	KERR, KENNETH J	
STREET ADDRESS	1601 FORUM PLACE #P2	
CITY-ST-ZIP	W. PALM BEACH FL 33401	
TITLE	S	<input type="checkbox"/> Delete
NAME	CALLAHAN, RICHARD P.	
STREET ADDRESS	1601 FORUM PLACE, #P-2	
CITY-ST-ZIP	WEST PALM BEACH FL 33401-8188	
TITLE	T	<input type="checkbox"/> Delete
NAME	SHIPLEY, ZACHARY	
STREET ADDRESS	1601 FORUM PLACE STE. #P-2	
CITY-ST-ZIP	W. PALM BEACH FL 33401-8188	
TITLE	CCEO	<input type="checkbox"/> Delete
NAME	KOCH, WILLIAM	
STREET ADDRESS	1601 FORUM PLACE STE. #P-2	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	AS	<input type="checkbox"/> Delete
NAME	DAVID W CLARK	
STREET ADDRESS	1601 FORUM PLACE P2	
CITY-ST-ZIP	W. PALM BEACH FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	EXECUTIVE VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHIB, ROHIT C.	
STREET ADDRESS	1601 FORUM PLACE STE. P-2	
CITY-ST-ZIP	W. PALM BEACH FL 33401	
TITLE	EXECUTIVE VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZODIACO, VINCENT P.	
STREET ADDRESS	9790 GATEWAY DRIVE	
CITY-ST-ZIP	RENO, NV	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVIS, WILLIAM	
STREET ADDRESS	1601 FORUM PLACE, STE. P-2	
CITY-ST-ZIP	W. PALM BEACH, FL	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ELIZARES, JAMES F.	
STREET ADDRESS	9790 GATEWAY DRIVE	
CITY-ST-ZIP	RENO, NV	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBINSON, M. BRAD	
STREET ADDRESS	9790 GATEWAY DRIVE	
CITY-ST-ZIP	RENO, NV	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIEGELSTEIN, S. ANDREW	
STREET ADDRESS	9790 GATEWAY DRIVE	
CITY-ST-ZIP	RENO, NV	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard P. Callahan

1/7/2000

561-697-4300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #