

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P36860**

1. Corporation Name

**ORLANDO COGEN II, INC.**

Principal Place of Business

**8300 EXCHANGE DRIVE  
ORLANDO FL 32809**

Mailing Address

**7201 HAMILTON BOULEVARD  
TAX DEPARTMENT  
ALLENTOWN PA 18195  
US**

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**

9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified

**12/30/1991**

4. FEI Number

**23-2684433**

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

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 ☒ DELETE  
NAME **P SUTTON, CHRIS J**  
STREET ADDRESS **8242 PHEASANT RUN**  
CITY-ST-ZIP **FOGELSVILLE PA**

TITLE ☐ DELETE  
NAME **AT GREEN, DAVID H**  
STREET ADDRESS **4488 LINDA LANE**  
CITY-ST-ZIP **EMMAUS PA**

TITLE ☒ DELETE  
NAME **SD AGGER, J H**  
STREET ADDRESS **2525 N MAIN ST**  
CITY-ST-ZIP **BETHLEHEM PA**

TITLE ☐ DELETE  
NAME **T DALEY, LEO J**  
STREET ADDRESS **5405 ANDREA DRIVE**  
CITY-ST-ZIP **WESCONSVILLE PA**

TITLE ☐ DELETE  
NAME **AT EVANS, JOHN C.**  
STREET ADDRESS **3873 MAULFAIR DRIVE**  
CITY-ST-ZIP **ALLENTOWN PA**

TITLE ☐ DELETE  
NAME **AS BOWES, CHARLES A., JR.**  
STREET ADDRESS **2257 GEORGETOWN DRIVE**  
CITY-ST-ZIP **MALVERN PA**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ 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

**Director**

☒ 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 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:

**David H. Green**

4/9/99

610-481-4027

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)

P36860  
3194369004730

**Orlando CoGen (II), Inc.**

7201 Hamilton Blvd.  
Allentown, PA 18195-1501

**Officers**

John E. McGlade	President
Douglass S. Lubbers	Vice President
Marshall L. Sullivan	Vice President and Treasurer
Kenneth R. Petrini	Vice President
W. Douglas Brown	Secretary
Carlos A. Almeida	Controller
Charles A. Bowes, Jr.	Assistant Secretary
Robert F. Gerken	Assistant Secretary
Ann E. Padjen	Assistant Secretary
Karen G. Wright	Assistant Secretary
John C. Evans	Assistant Treasurer
David H. Green	Assistant Treasurer

**Directors**

W. Douglas Brown  
Leo J. Daley