FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAR -3 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P40415 (2)

1. Corporation Name
ORLANDO POWER GENERATION I INC.

Principal Place of Business	Mailing Address
7400 WEST 110TH STEET, SUITE 320 OVERLAND PARK KS 66210	911 MAIN SUITE 3000 KANSAS CITY MO 64105 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/10/1992
3a. Date of Last Report: 04/15/1994

2. Principal Place of Business	2a. Mailing Address
21 10700 E. 350 Highway	26 911 Main
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 3000
City & State 23 Kansas City, MO	City & State 28 Kansas City, MO
Zip / Country 24 64138 / 25 US	Zip / Country 29 64105 / 30 US

4. FEI Number: 48-1120961 ☐ 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
C T CORPORATION SYSTEM 1200 SOUTH 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 _____ DATE
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	1.1 TITLE	Asst. Secretary/Asst. Treas.	☐ Change ☒ Addition
NAME	CLAAR, DONALD K.	1.2 NAME	S. Thomas Wertz	
STREET ADDRESS	4705 W. 112TH TERRACE	1.3 STREET ADDRESS	7400 W. 110th Street, Ste 320	
CITY-ST-ZIP	LEAWOOD KS	1.4 CITY-ST-ZIP	Overland Park, KS 66210	
TITLE	V	2.1 TITLE	Asst. Secretary	☐ Change ☒ Addition
NAME	REED, BRUCE A.	2.2 NAME	Dale J. Wolf	
STREET ADDRESS	5628 SUWANEE	2.3 STREET ADDRESS	2308 W. 123rd Terrace	
CITY-ST-ZIP	FAIRWAY KS	2.4 CITY-ST-ZIP	Leawood, KS 66211	
TITLE	S	3.1 TITLE		☐ Change ☐ Addition
NAME	SCHULTE, NANCY J.	3.2 NAME		
STREET ADDRESS	2605 W. 50TH	3.3 STREET ADDRESS		
CITY-ST-ZIP	WESTWOOD KS	3.4 CITY-ST-ZIP		
TITLE	CD	4.1 TITLE	D	☒ Change ☐ Addition
NAME	GREEN, RICAHRD C., JR.	4.2 NAME	Green, Robert K	
STREET ADDRESS	1215 W. 57TH STREET	4.3 STREET ADDRESS	2318 W. 59th Street	
CITY-ST-ZIP	KANSAS CITY MO	4.4 CITY-ST-ZIP	Shawnee Mission, KS 66208	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	BAKER, JOHN R.	5.2 NAME	Robert L. Howell	
STREET ADDRESS	205 OXFORD LANE	5.3 STREET ADDRESS	4400 W. 87th Terrace	
CITY-ST-ZIP	LEE'S SUMMIT MO	5.4 CITY-ST-ZIP	Prairie Village, KS 66207	
TITLE	V	6.1 TITLE		☐ Change ☐ Addition
NAME	COSTANZA, FRANK B	6.2 NAME		
STREET ADDRESS	2316 W 125TH ST	6.3 STREET ADDRESS		
CITY-ST-ZIP	LEAWOOD KS	6.4 CITY-ST-ZIP		

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)(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: Nancy J. Schulte Nancy J. Schulte, Secretary 816-691-3528
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Title) (Daytime Phone #)

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