

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

APPROVED  
AND  
FILED

95 APR 19 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P93000011033 (6)**

1. Corporation Name

**POWER INTERSTATE ENERGY SERVICES CORPORATION**

**500001461895**

**-04/21/95--01015--010**

**\*\*\*\*\*200.00 \*\*\*\*\*200.00**

DO NOT WRITE IN THIS SPACE.

|                                                                                         |                                                     |                                                                                                                                                                |                                              |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| Principal Place of Business<br><b>3201 34TH STREET SOUTH<br/>ST PETERSBURG FL 33711</b> |                                                     | Mailing Address<br><b>ONE PROGRESS PLAZA<br/>SUITE 2600-ATTN P. FRY<br/>ST. PETERSBURG FL 33601</b>                                                            |                                              |
| 2. Principal Place of Business<br><b>21</b>                                             | 2a. Mailing Address<br><b>26 One Progress Plaza</b> | 3. Date Incorporated or Qualified<br><b>02/12/1993</b>                                                                                                         | 3a. Date of Last Report<br><b>03/25/1994</b> |
| Suite, Apt. #, etc.<br><b>22</b>                                                        |                                                     | 4. FEI Number<br><b>59-3172899</b>                                                                                                                             |                                              |
| City & State<br><b>23</b>                                                               |                                                     | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                |                                              |
| Zip<br><b>24</b>                                                                        |                                                     | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                          |                                              |
| Country<br><b>25</b>                                                                    | Zip<br><b>29 33701</b>                              | 7. This corporation has liability for intangible tax under S. 199.032,<br>Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                              |
| Country<br><b>30 USA</b>                                                                |                                                     |                                                                                                                                                                |                                              |

**9. Name and Address of Current Registered Agent**

**BROWN, PATRICIA  
3201 34TH STREET SOUTH  
ST PETERSBURG FL 33711**

**10. Name and Address of New Registered Agent**

**81 Name JAMES P. FAMA**  
**82 Street Address (P.O. Box Number is Not Acceptable) 3201 34th St. So.**  
**83**  
**84 City St. Petersburg FL 85 Zip Code 33711**

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 re-registering)

DATE

| 12. OFFICERS AND DIRECTORS                      |                                                   | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |                                                                              |
|-------------------------------------------------|---------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br><b>DCPC</b>                            | NAME<br><b>KEESLER, ALLEN J JR</b>                | 1.1 TITLE<br><b>D/C/P/CEO</b>                          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS<br><b>3201 34TH STREET SOUTH</b> | CITY - ST - ZIP<br><b>ST PETERSBURG FL 33711</b>  | 1.2 NAME                                               |                                                                              |
|                                                 |                                                   | 1.3 STREET ADDRESS                                     |                                                                              |
|                                                 |                                                   | 1.4 CITY - ST - ZIP                                    |                                                                              |
| TITLE<br><b>D</b>                               | NAME<br><b>KUZMA, DAVID</b>                       | 2.1 TITLE<br><b>DELETE</b>                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS<br><b>3201 34TH STREET SOUTH</b> | CITY - ST - ZIP<br><b>ST PETERSBURG FL 33711</b>  | 2.2 NAME<br><b>DELETE</b>                              |                                                                              |
|                                                 |                                                   | 2.3 STREET ADDRESS<br><b>DELETE</b>                    |                                                                              |
|                                                 |                                                   | 2.4 CITY - ST - ZIP<br><b>DELETE</b>                   |                                                                              |
| TITLE<br><b>VT</b>                              | NAME<br><b>HEINICKA, JEFFERY R</b>                | 3.1 TITLE<br><b>D</b>                                  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS<br><b>3201 34TH STREET SOUTH</b> | CITY - ST - ZIP<br><b>ST PETERSBURG FL 33711</b>  | 3.2 NAME                                               |                                                                              |
|                                                 |                                                   | 3.3 STREET ADDRESS                                     |                                                                              |
|                                                 |                                                   | 3.4 CITY - ST - ZIP                                    |                                                                              |
| TITLE<br><b>D</b>                               | NAME<br><b>HANCOCK, JOHN A</b>                    | 4.1 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS<br><b>3201 34TH ST. S.</b>       | CITY - ST - ZIP<br><b>ST. PETERSBURG FL 33711</b> | 4.2 NAME                                               |                                                                              |
|                                                 |                                                   | 4.3 STREET ADDRESS                                     |                                                                              |
|                                                 |                                                   | 4.4 CITY - ST - ZIP                                    |                                                                              |
| TITLE<br><b>V</b>                               | NAME<br><b>SMALLWOOD, JAMES V</b>                 | 5.1 TITLE                                              | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS<br><b>ONE PROGRESS PLAZA</b>     | CITY - ST - ZIP<br><b>ST. PETERSBURG FL 33701</b> | 5.2 NAME                                               |                                                                              |
|                                                 |                                                   | 5.3 STREET ADDRESS<br><b>3201 34th St. So.</b>         |                                                                              |
|                                                 |                                                   | 5.4 CITY - ST - ZIP<br><b>St. Petersburg, FL 33711</b> |                                                                              |
| TITLE<br><b>S</b>                               | NAME<br><b>HALEY, KATHLEEN M</b>                  | 6.1 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS<br><b>ONE PROGRESS PLAZA</b>     | CITY - ST - ZIP<br><b>ST. PETERSBURG FL 33701</b> | 6.2 NAME                                               |                                                                              |
|                                                 |                                                   | 6.3 STREET ADDRESS                                     |                                                                              |
|                                                 |                                                   | 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 110.07(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 receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:**

*Kathleen M. Haley*

**KATHLEEN M. HALEY,  
SECRETARY**

**3/31/95**

**(813) 824-6531**

2

**POWER INTERSTATE ENERGY SERVICES CORPORATION**

**NAMES OF OFFICERS**

**AND DIRECTORS**

**TITLE**

**STREET ADDRESS**

**CITY AND STATE**

|                      |           |                    |                          |
|----------------------|-----------|--------------------|--------------------------|
| Hancock, J. A.       | D         | 3201 34th St. So.  | St. Petersburg, FL 33711 |
| Keesler, Jr., A. J.  | D/C/P/CEO | 3201 34th St. So.  | St. Petersburg, FL 33711 |
| Heinicka, Jeffrey R. | D         | 3201 34th St. So.  | St. Petersburg, FL 33711 |
| Smallwood, James V.  | V         | 3201 34th St. So.  | St. Petersburg, FL 33711 |
| Fama, James P.       | GC        | 3201 34th St. So.  | St. Petersburg, FL 33711 |
| Haley, Kathleen M.   | S         | One Progress Plaza | St. Petersburg, FL 33701 |
| McDonald, K. E.      | AT        | 3201 34th St. So.  | St. Petersburg, FL 33711 |

A = Assistant  
C = Chairman  
CEO = Chief Executive Officer  
D = Director  
GC = General Counsel  
P = President  
S = Secretary  
T = Treasurer  
V = Vice President