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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000055352 (4)

FPL TERMOCANDELARIA, INC.

| 2. Procept Party of Nationes 2a, Mailing Address 3c, Mailing Address 4. FER Humber 55-0684354 10c, Application 55-0684354 10c, Application 55-0684354 10c, Application 55-075 Additional | Principal Place 11760 U.S. HIG SUITE 600 NORTH PALM I | | Mailing Address 11760 U.S. HIGHWAY ON SUITE 600 NORTH PALM BEACH FL | | | | | |
|--|--|--|--|-----------------|------------------|---|-------------------------------------|------------------------------------|
| Sunc. Apt #, etc. 28 | | | | | | 3. Date Incorporated or Qualified 06/27/1996 | 3a. Date of Las | st Report |
| Suite, April 4, etc. Suite, April 4, etc. | 2. Principal Pi 21 | ace of Business | | | | , - : | | Applied For Not Applicable |
| City & States City & States City & States City & States | | #, etc. | ······ | | | 5. Certificate of Status Desired | | |
| April | City & State 23 | | ļŋ ' | | | | | |
| LEON, J E 9250 WEST FLAGLER STREET MIAMI FL 33174 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was sufficiency by the 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 sufficiency by the corporation submits this statement for the purpose of changing its registered office. In a complete of the provisions of Section 807 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS III 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 12 15. INSERT ADDRESS III 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 12 17. ADDITIONS/CHANGES TO OFF | |) | <u>├</u> | \vdash | ry | | | |
| ### City ### Land ### City ### Land ### | | | rrent Registered Agent | | . 7 | | | |
| MIAMI FL 33174 85 | | | | 8 | 1 Name | | | |
| ### City ### | | | | 8 | 2 Street A | ddress (P.O. Box Number is Not Accepta | ible) | · |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Fiorida 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 submitorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505. Fiorida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 14. TIME 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 15. TIME 15. TIME 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 15. TIME 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONSCHANGES TO OFFICERS AN | MIAN | AI PL 331/4 | | - | <u> </u> | | | |
| 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, and the information in the purpose of changing its registered office or requisive agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. Common | • | | | 10 | ا" | | | |
| 11. Pursuant to the provisione of Sections 607.0502 and 607.1508, Fixerial Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Fiorida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. MAKE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. In Title 15. Title 16. Title 17. DELETE 18. ASSTAT JURIS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ASSTAT JURIS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ASSTAT JURIS ASS | | | | 8 | 4 City | | 85 7 | ip Code |
| Change C | office of re agent. I ar | egistered agent, or both, in the S | State of Florida, Such change was | authorized I | by the corp | corporation submits this statement for the oration's board of directors. I hereby accoration | purpose of changing the appointment | ig its registered as registered |
| TITLE TANCER, EDWARD F T1760 U.S. HIGHWAY ONE NORTH PALM BEACH FL 33408 TITLE DELETE | SIGNATURE. | Signature typical or printed name of registere | ed agent and title if applicable. (NO | TE Registered A | gent signature r | required when reinstating) | DATE | |
| TANCER, EDWARD F 11760 U.S. HIGHWAY ONE NORTH PALM BEACH FL 33408 DELETE 21 TITLE 22 MAME 23 STREET ADDRESS 1.4 CITY-S1-2IP DOTE | 12. | OFFICERS | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFF | CERS AND DIRECT | ORS IN 12 |
| 11760 U.S. HIGHWAY ONE 13 STREET ADDRESS 14 CITY - ST - 2P | TITLE | • | ☐ DELETE | 1.5 TITLE | | Asst/S | K Chan | ge Addition |
| NORTH PALM BEACH FL 33408 DELETE DIFFERENCES DIFFERENCES DIFFERENCE DIFF | NAME | | • | 1.2 NAM | E | | | |
| DELETE DELETE 2.1 TITLE LEIGHTON, MICHAEL L 1.1760 US HIGHWAY ONE #600 CITY-SI-ZIP DELETE 3.1 TITLE D/Y Change K.] Addition CITY-SI-ZIP DELETE S. Change Carpenters, Frances M. Change Carpenters, Frances M. Change Carpenters Carpenters, Frances Carpenters | STREET ADDRESS | | | 1.3 STAE | ET ADDRESS | | | |
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| CITY-ST-ZIP A 4 CITY-ST-ZIP NORTH PALM BEACH FL 33408 Change C | STREET ADORESS | | | 4.3 STRE | | | 600 | |
| DELETE 5.1 TITLE S CARPENTER, FRANCES M 5.2 NAME CARPENTER, FRANCES M 11.760 US HIGHWAY ONE #600 6.1 Y- ST- ZIP 11.1 To hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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; the | CITY-ST-7IF | | | | | | | |
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| ITILE DELETE 6.1 TITLE Change Addition | STREET ADDRESS | | | 5.3 STRE | et address | 11760 US HIGHWAY ONE # | | |
| NAME STARET ADDRESS CITY ST-7/P 14. I do 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 path; the | Dily-St-2iP | | | 5.4 CITY | -ST-ZIP | NORTH PALM BEACH FL 33 | 408 | |
| STAFFT ADDRESS CITY ST-ZIP 14. I do 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 path; the | TITLE | | DELETE | 6.1 TITLE | | | | ge Addition |
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| 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 path; the | CITY - S1 - 7IP | | ······································ | | | | | |
| I am an officer or director of he corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name | intermation | n indicated on this annual report | i or supplemental annual report is: | true and ac | curate and | that my signature shall have the same led | al effect as if made | under oath: tha |

Frances M. Carpenter

4/7/97

561-691-3500

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