P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * ***C FEE REQUIRED Name ***Street or P.O. Address ***Street or P.O. Address ***Street or P.O. Address ***Directors: **Directors: ***Directors: ***Directors: ***Directors: ***Directors: ***Directors: ***Directors: ***Directors: ***Director	0. 94504	92864 Idaho Corporation A		ISSUED: 07-05-1994 2. Registered Agent and Office		
Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * No FEE REQUIRED Name Name Street or P.O. Address City State City State City State City State City No State City State C	Poturn To	Due No Later Tha	Due No Later Than November 1,400/			
Room 203, Statehouse P.O. BOX 83720 Depth 2015 Sign Size Size Size Size Size Size Size Size					KECI	
* FIRST NOTICE * NO FEE REQUIRED	Room 203, Statehouse					
Names and Addresses of Officers and Directors Name Street or P.O. Address City State Zi President: Please see attached Secretary: Directors: One of Business 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.		ONE GREENWIC	H PLAZA		Inder The Laws	
Name Street or P.O. Address City State Zignessident: Please see attached Secretary: Directors: 5. Nature of Business 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge for the complete.		GREENWICH	CT 06830	1 00		
President: Please see attached Secretary: Directors: 6. I certify that this Annual Report has been examined by me and is to the best of my knowled true, correct and complete:	Names and Addresses of Office	ers and Directors	de la companya de la			
Secretary: Directors: 6. I certify that this Annual Report has been examined by me and is to the best of my knowled true, correct and complete.		<u>Name</u>	Street or P.O. Address	City	State Zip	
true, correct and completer	Secretary:					
true, correct and complete	<u>-</u>			5 *		
true, correct and completer	-			\$ •		
true, correct and completer						
1	-					
Hydroelectric Power $\frac{\text{Signature}}{\text{Name}} \frac{\text{Nonnie}}{\text{Pinted}} = \frac{\text{Signature}}{\text{Ronnie}} \frac{\text{Signature}}{\text{Ronnie}} = \frac{10/5/94}{\text{Title}}$ Title Assistant Treasure	-	6. I certify tha	t this Annual Report has been exal t and completer	mined by me and is to th		

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OFFICERS AND DIRECTORS

TITLE	NAME	BUSINESS ADDRESS
*President, Chairman of the Board	Olof S. Nelson	One Greenwich Plaza Greenwich, CT 06830
*Executive VP	Michael I. Storch	One Greenwich Plaza Greenwich, CT 06830
Assistant Secretary, Treasurer, Vice President	Patrick J. Danna	One Greenwich Plaza Greenwich, CT 06830
Vice President	Norman E. Kamp	One Greenwich Plaza Greenwich, CT 06830
VP, Human Resources	Mary Z. Keyerleber	200 Bulfinch Drive Andover, MA 01810
* Sr. VP Administration, General Counsel & Secretary	Edward M. Stern	One Greenwich Plaza Greenwich, CT 06830
VP, Operations	Michael J. Alessi, Sr.	Andover Business Park 200 Bulfinch Drive Andover, MA 01810
Sr. VP, Operations	Daniel S. Pease	One Greenwich Plaza Greenwich, CT 06830
Assistant Secretary	John W. Bernotavicz	Curtis Thaxter Stevens Broder & Micoleau One Canal Plaza Portland ME 04112
Assistant Secretary	Michael B. Peisner	Curtis Thaxter Stevens Broder & Micoleau One Canal Plaza Portland, ME 04112
Assistant Treasurer & Assistant Secretary	Neil A. Manna	One Greenwich Plaza Greenwich, CT 06830
Assistant Treasurer of Taxes	Ronnie V. Gurney	One Greenwich Plaza Greenwich, CT 06830

*Directors

Terms expire as designated by directors.

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