



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. Rorer Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2008

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 000110656		2. Exact name of the limited liability company Pawtucket Power Holding Company, L.L.C.	
3. State of Formation Delaware		4. Brief description of the character of the business which is actually conducted in Rhode Island Electricity generation	
5. Principal office address 1210, 715 5 Avenue SW		City Calgary	State AB, Canada
		Zip T2P 2X6	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Terry Zimaro, CA		Contact Title Senior Financial Analyst	
Street Address 1210, 715 5 Avenue SW		City Calgary	State AB, Canada
		Zip T2P 2X6	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CT Corporation System		Address Providence	
Address 10 Weybosset Street		City Rhode Island	Zip 02903

RECEIVED
 STATE
 SEP 16 PM 12:11
 RECEIVED
 STATE
 SEP 18 PM 12:03
 RECEIVED
 STATE
 SEP 4 PM 12:46

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

FILE

000110656

SEP 18 2009

By (Signature)
029-99164

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

(Signature) February 4, 2009
Signature of Authorized Person Date

Terry Zimaro, CA
Print or Type Name of Authorized Person

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY