



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
 * In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 115689		2. Name of Corporation Calpine Tiverton, Inc.			
3. Street Address Principal Business Office c/o Calpine Corporation, 50 W. San Fernando St.			City San Jose	State California	Zip 95113
4. Business Phone No. (408)995-5115		5. State of Incorporation Delaware			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert P. May			Vice President Name William Chenette		
Street Address c/o Calpine Corporation, 50 W. San Fernando St.			Street Address c/o Calpine Corporation, 50 W. San Fernando St.		
City San Jose	State California	Zip 95113	City San Jose	State California	Zip 95113
Secretary Name Gregory L. Doody			Treasurer Name CFO - Charles B. Clark, Jr.		
Street Address c/o Calpine Corporation, 50 W. San Fernando St.			Street Address c/o Calpine Corporatio, 50 W. San Fernando St.		
City San Jose	State California	Zip 95113	City San Jose	State California	Zip 95113
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert P. May			Director Name		
Street Address c/o Calpine Corporation, 50 W. San Fernando St.			Street Address		
City San Jose	State California	Zip 95113	City	State	Zip
Director Name Gregory L. Doody			Director Name		
Street Address c/o Calpine Corporation, 50 W. San Fernando St.			Street Address		
City San Jose	State California	Zip 95113	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000			1000	common	no par value

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date **FILED**
 Check No. **MAR 06 2008**
 By: **By 42905**
 FOR SECRETARY OF STATE USE ONLY

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.

Charles B. Clark, Jr. 2-15-08
 Signature Date
 Charles B. Clark, Jr.
 Print or Type Name
 Chief Financial Officer
 Title