

RECEIVED FPSC

15 OCT -5 AM 9:22

COMMISSION
CLERK

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|--|
| <ul style="list-style-type: none">Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.Print your name and address on the reverse so that we can return the card to you.Attach this card to the back of the mailpiece, or on the front if space permits. | <p>A. Signature x FPL - JB <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Receiver (Printed Name) 700 Universe Blvd <input type="checkbox"/> Agent Juno Beach FL 33408 <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p> |
| <p>1. Article Addressed to: 150001-EI DN 10751-09</p> <p>MARIA J MONCADA PRINCIPAL ATTY FLORIDA POWER & LIGHT COMPANY 700 UNIVERSE BLVD JUNO BEACH FL 33408-0420</p> | <p>Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below. <input type="checkbox"/> No Juno Beach FL 33408</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> |
| <p>2. Article Number (Transfer from service label)</p> | <p>7006 0100 0003 1097 3263</p> |

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540