

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature X <b>FPL - JB</b> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: <b>150001-EI</b> <b>DNS 03097-13; 02840-13;</b> <b>04444-13</b>	B. Received by ( <i>Printed Name</i> ) <b>700 Universe Blvd</b> C. Date of Delivery
MARIA J MONCADA PRINCIPAL ATTY FLORIDA POWER & LIGHT COMPANY 700 UNIVERSE BLVD JUNO BEACH FL 33408-0420	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <b>Juno Beach FL 33408</b>
2. Article Number (Transfer from service label)	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. 4. Restricted Delivery? ( <i>Extra Fee</i> ) <input type="checkbox"/> Yes
PS Form 3811, February 2004	Domestic Return Receipt <span style="float: right;">102595-02-M-1540</span>

RECEIVED FPSC  
 15 MAY 26 AM 9:27  
 COMMISSION CLERK