2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9900006095

1. Entity Name

CENTRAL PENN ENERGY COMPANY, INC.



FILED Feb 27, 2003 8:00 am Secretary of State

02-27-2003 90127 014 ***150.00

				WELLER				
P.O. BOX 26765 P.O.		Mailing Address P.O. BOX 26765 RICHMOND VA 23261						
2. Principal	Place of Business 3.	Mailing Address				1 886 1888 1888 1888	1 3 101 3111 1331	
							•	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4.	4. FEI Number 25-1478196		oplied For	
Zip	Country	Zip	Country	5.	Certificate of Status Desired .	\$8.75 Add	ditional	
	6. Name and Address of Current Regi	stered Agent		7.	Name and Address of New Register	· · · · · · · · · · · · · · · · · · ·	<u>-</u>	
		Name						
	RVICES, INC.		Street Address (P.O. Box Number is Not Acceptable)					
526 EAST	T PARK AVENUE		0,10017	13000 (1.0.1)	2			
TALLAHA	SSEE FL 32301							
			City			Zip Code	e	
8. The above	e named entity submits this statement for the	purpose of changing its r	registered office o	or registered ag	gent, or both, in the State of Florida.	am familiar with,	and accept	
the obliga	ttions of registered agent.						·	
SIGNATURE								
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE:	Registered Agent signa	ture required when r	einstating) DA	TE		
	FILE NOW!!! FEE IS \$150.00				O Classics Committee Circumstance	A = 0	_	
Afte	r May 1, 2003 Fee will be \$550.00			,	Election Campaign Financing Trust Fund Contribution.		O May Be to Fees	
	k Payable to Florida Department of Stat							
10.	OFFICERS AND DIRE		11.	AC AC	DDITIONS/CHANGES TO OFFICERS A			
TITLE NAME	PALMER, LARRY E	☐ Delete	TITLE NAME			Change	Addition	
STREET ADDRESS	4 NORTH FOURTH STREET		STREET ADDRESS	-				
CITY-ST-ZIP	RICHMOND VA 23219		CITY-ST-ZIP				i	
TITLE	PD	☐ Delete	TITLE	1		☐ Change	Addition	
NAME	SUBOLESKI, STANLEY		NAME			_ ,	_	
STREET ADDRESS	4 NORTH 4TH STREET		STREET ADDRESS	-				
CITY-ST-ZIP	RICHMOND VA 23219		CITY-ST-ZIP	<u> </u>		 		
TITLE	\$ W	XX Delete	TITLE	Secreta		XX Change	☐ Addition	
NAME STREET ADDRESS	MASON, A. GEORGE 4 NORTH 4TH STREET		NAME STREET ADDRESS		y-JSturgill, Jr	;- - .		
CITY-ST-ZIP	RICHMOND VA 23219		CITY-ST-ZIP	1	h 4th Street			
TITLE	THOUSAND TO EVE 19	☐ Delete	TITLE	Richmon	nd, Virginia 23219	Change	☐ Addiston	
NAME		□ Delete	NAME			Change	☐ Addition	
STREET ADDRESS	4		STREET ADDRESS					
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP				}	
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME			NAME			-		
STREET ADDRESS			STREET ADDRESS				{	
CITY-ST-ZIP			CITY-ST-ZIP	I			j.	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZiP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10

Change

☐ Addition