FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 13 1998 8:00am
Secretary of State

DOCUMENT # N19329 **(4)**

1. Corporation Name

GULF POWER FOUNDATION, INC.

Principal Place of Business	Mailing Address
500 BAYFRONT PARKWAY PENSACOLA FL 32501	500 BAYFRONT PARKWAY PENSACOLA FL 32501

3. Date Incorporated or Qualified: 02/19/1987

4. FEI Number: 59-2817740 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26 ONE ENERGY PLACE
Suite, Apt #, etc: 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 PENSACOLA FL
Zip 24 Country 25	Zip 29 32520-0786 Country 30 ESCAMBIA

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TATE, WARREN E.
500 BAYFRONT PARKWAY
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

		DELETE
TITLE	D	☐
NAME	FISHER, JR. FRANCIS M.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	CD	☐
NAME	HODGES, JR. JOHN E.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	TD	☐
NAME	TATE, WARREN E.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	D	☒
NAME	HOLLAND, G EDISON JR.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	D	☐
NAME	SCARBROUGH, ARLAN E.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	SD	☐
NAME	LABRATO, RONNIE R	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

		Change	Addition
1.1 TITLE	Tr	☒	☐
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP	PENSACOLA FL 32501		
2.1 TITLE	C/Tr	☒	☐
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP	PENSACOLA FL 32501		
3.1 TITLE	T/Tr	☒	☐
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP	PENSACOLA FL 32501		
4.1 TITLE	Tr	☐	☒
4.2 NAME	MOORE, ROBERT G.		
4.3 STREET ADDRESS	500 BAYFRONT PARKWAY		
4.4 CITY-ST-ZIP	PENSACOLA FL 32501		
5.1 TITLE	Tr	☒	☐
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP	PENSACOLA FL 32501		
6.1 TITLE	S/Tr	☒	☐
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP	PENSACOLA FL 32501		

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: WE Tate /W.E. TATE 2-3-98 850-444-6206

CR2E037 (10/97)