

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90047 036 ****61.25

DOCUMENT # N19329

1. Entity Name

GULF POWER FOUNDATION, INC.

Principal Place of Business

Mailing Address

500 BAYFRONT PARKWAY
 PENSACOLA FL 32501

ONE ENERGY PLACE
 PENSACOLA FL 32520-0001
 US

00021165



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2817740

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TATE, WARREN E.
 500 BAYFRONT PARKWAY
 PENSACOLA FL 32501

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input type="checkbox"/> Delete
NAME	FISHER, JR. FRANCIS M.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	CT	<input type="checkbox"/> Delete
NAME	HODGES, JR. JOHN E.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	TT	<input type="checkbox"/> Delete
NAME	TATE, WARREN E.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	T	<input type="checkbox"/> Delete
NAME	MOORE, ROBERT G	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	T	<input type="checkbox"/> Delete
NAME	SCARBROUGH, ARLAN E.	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	ST	<input type="checkbox"/> Delete
NAME	LABRATO, RONNIE R	
STREET ADDRESS	500 BAYFRONT PARKWAY	
CITY-ST-ZIP	PENSACOLA FL 32501	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E037 (9/99)

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 617, 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.

SIGNATURE: SIGNATURE REQUIRED W. E. Tate

February 3, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #