

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90136 022 ****61.25

DOCUMENT # N19329

1. Entity Name

GULF POWER FOUNDATION, INC.

Principal Place of Business

**500 BAYFRONT PARKWAY
 PENSACOLA FL 32501**

Mailing Address

**ONE ENERGY PLACE
 PENSACOLA FL 32520-0786
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2817740

Applied For

Not Applicable

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

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
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 2, 2001

Date Daytime Phone #

850-444-6206

CR2E037 (10/00)