## **2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000145526

**Entity Name: GULF POWER COMPANY** 

**Current Principal Place of Business:** 

500 BAYFRONT PARKWAY PENSACOLA. FL 32520-0786

**Current Mailing Address:** 

ONE ENERGY PLACE PENSACOLA, FL 32520

FEI Number: 59-0276810 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, TERRY A 500 BAYFRONT PKWY PENSACOLA, FL 32520-0786 US

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:

Electronic Signature of Registered Agent

Date

FILED Apr 13, 2015

**Secretary of State** 

CC9653628648

Officer/Director Detail:

Title ST Title ASAT

Name RITENOUR, SUSAN D Name DAVIS, TERRY A

Address 500 BAYFRONT PKWY Address 500 BAYFRONT PKWY

City-State-Zip: PENSACOLA FL 32520-0786 City-State-Zip: PENSACOLA FL 32520-0786

Title P Title VP

Name CONNALLY, STANLEY W Name TERRY, BENTINA C

Address 500 BAYFRONT PKWY Address 500 BAYFRONT PKWY

City-State-Zip: PENSACOLA FL 32520-0100 City-State-Zip: PENSACOLA FL 32520-0100

Title VP Title VP

Name SMITH, WENDELL E Name TEEL, R S

Address 500 BAYFRONT PARKWAY Address 500 BAYFRONT PKWY

City-State-Zip: PENSACOLA FL 32520-0100 City-State-Zip: PENSACOLA FL 32520

Title VP Title COMPTROLLER

Name BURROUGHS, MICHAEL L Name HODNETT, JAN J

Address 500 BAYFRONT PARKWAY Address 500 BAYFRONT PARKWAY

City-State-Zip: PENSACOLA FL 32520-0786 City-State-Zip: PENSACOLA FL 32520-0100

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TERRY A DAVIS

ASSIST SEC & ASSIST TREAS

04/13/2015

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name BENSE, ALLAN G

Address 1405 W. BEACH DRIVE

City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR

Name O'SULLIVAN, MORT III

Address 316 SOUTH BAYLEN STREET

SUITE 300

City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR

Name SCOTT, WINSTON E

Address 150 W UNIVERSITY BLVD

City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR

Name MACQUEEN, JULIAN B

Address 113 BAYBRIDGE PARK

City-State-Zip: GULF BREEZE FL 32561

Title VP

Name FLETCHER, JIM R.

Address 500 BAYFRONT PARKWAY

City-State-Zip: PENSACOLA FL 32520-0100

Title DIRECTOR

Name CALDER, DEBORAH H

Address 5550 HERITAGE OAKS DRIVE

City-State-Zip: PENSACOLA FL 32401

Title DIRECTOR

Name CRAMER, WILLIAM C JR.

Address 2251 W. 23RD STREET

SUITE 300

City-State-Zip: PANAMA CITY FL 32502

Title ASST. SECRETARY, ASST.

**TREASURER** 

Name CAEN, MELISSA K

Address 30 IVAN ALLEN JR. BLVD

City-State-Zip: ATLANTA GA 30308

Title DIRECTOR

Name REHWINKEL, MICHAEL T

Address 211 CEVALLOS STREET

City-State-Zip: PENSACOLA FL 32502