

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000003818

Entity Name: AEP ENERGY, INC.

**Current Principal Place of Business:**

1 RIVERSIDE PLAZA  
COLUMBUS, OH 43215

**Current Mailing Address:**

1 RIVERSIDE PLAZA  
COLUMBUS, OH 43215 US

FEI Number: 03-0459115

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title DIRECTOR  
Name AKINS, NICHOLAS K  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR  
Name FEINBERG, DAVID M  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title PRESIDENT  
Name HALL, GREG B  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title SECRETARY  
Name FEINBERG, DAVID M  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title VP  
Name SLISHER, SCOTT D  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title VP  
Name FEINBERG, DAVID M  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title VP  
Name MYERS, THOMAS M  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR  
Name ZEBULA, CHARLES E  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

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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: LLENDE, JAMES X

VICE PRESIDENT - TAX

04/20/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name PETERSEN, JAMES C  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR  
Name SLOAT, JULIA A  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title VP  
Name MERZEL, JEFFREY M  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title VP  
Name SLOAT, JULIA A  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title TREASURER, VP  
Name SHERWOOD, JULIE A  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215

Title VP  
Name JANSEN, JOEL H  
Address 1 RIVERSIDE PLAZA  
City-State-Zip: COLUMBUS OH 43215