

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 191988

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** PEOPLES GAS SYSTEM (FLORIDA), INC.

**Current Principal Place of Business:**

702 N. FRANKLIN STREET  
TAMPA, FL 33602 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 111  
TAMPA, FL 33601 US

**New Mailing Address:**

**FEI Number:** 59-0954306      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ATTAL, C.A. III  
702 NORTH FRANKLIN STREET  
TAMPA, FL 33602 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GILLETTE, G. L.  
Address: 702 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 336024429

Title: PD  
Name: NARZISSENFELD, B.  
Address: 702 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 336024429

Title: S  
Name: SCHWARTZ, D. E.  
Address: 702 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 336024429

Title: DVT  
Name: CALLAHAN, S. W.  
Address: 702 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 336024429

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: D. E. SCHWARTZ

S

04/12/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date