

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 21, 2005 8:00 am**  
**Secretary of State**

02-21-2005 90071 045 \*\*\*150.00

<b>DOCUMENT # 802737</b>					
1. Entity Name GULF POWER COMPANY					
Principal Place of Business 500 BAYFRONT PKWY PENSACOLA, FL 82520-0786 US			Mailing Address 500 BAYFRONT PKWY PENSACOLA, FL 82520-0786 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 59-0276810	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MALONE, LINDA G 500 BAYFRONT PARKWAY PENSACOLA, FL 32520-0786			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	ST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RITENOUR, S.D.		NAME		
STREET ADDRESS	500 BAYFRONT PKWY		STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA, FL		CITY-ST-ZIP		
TITLE	ASAT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MALONE, L. G		NAME		
STREET ADDRESS	500 BAYFRONT PKWY		STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANCHORS, C.L.		NAME		
STREET ADDRESS	909 MAR WALT DRIVE, STE 1014		STREET ADDRESS		
CITY-ST-ZIP	FT. WALTON BEACH, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CRAMER, JR., W.C.		NAME		
STREET ADDRESS	2251 WEST 23RD STREET		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DONOVAN, SR., F.C.		NAME		
STREET ADDRESS	<del>346 S DAYLEN STREET</del>		STREET ADDRESS	449 West Main Street	
CITY-ST-ZIP	PENSACOLA, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PULLUM, W.A.		NAME		
STREET ADDRESS	8494 NAVARRE PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	NAVARRE, FL		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 607, 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: <i>Susan D. Ritenour</i>			Date: 2/17/05		
Susan D. Ritenour, Secretary			Daytime Phone #		

# ATTACHMENT

#802737

20013206

## CONTINUATION SHEET

TO

### CORPORATION 2005 ANNUAL REPORT

#### GULF POWER COMPANY

#### OFFICERS

STORY, S. N.	P/CEO/D	500 BAYFRONT PARKWAY	PENSACOLA, FL
FISHER, F. M., JR.	V	500 BAYFRONT PARKWAY	PENSACOLA, FL
JACOB, P. BERNARD	V	500 BAYFRONT PARKWAY	PENSACOLA, FL
LINDEMANN, E. N.	V	270 PEACHTREE STREET	ATLANTA, GA
LABRATO, R. R.	V/CFO*/CT**	500 BAYFRONT PARKWAY	PENSACOLA, FL
RITENOUR, S. D.	S/T***	500 BAYFRONT PARKWAY	PENSACOLA, FL
USSERY, G. L.	V	500 BAYFRONT PARKWAY	PENSACOLA, FL

\*CFO - Chief Financial Officer

\*\*CT - Comptroller

\*\*\*S/T - Secretary/Treasurer

#### DIRECTORS

ANCHORS, C. L.	D	909 MAR WALT DRIVE, SUITE 1014	FT. WALTON BEACH, FL
CRAMER JR., W. C.	D	2251 WEST 23 <sup>RD</sup> STREET	PANAMA CITY, FL
DONOVAN SR., F. C.	D	449 WEST MAIN STREET	PENSACOLA, FL
PULLUM, W. A.	D	8494 NAVARRE PARKWAY	NAVARRE, FL
SCOTT, WINSTON E.	D	3378 CAPPIO DRIVE	MELBOURNE, FL