

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000061

FILED
Apr 14, 2008
Secretary of State

Entity Name: GE ENERGY MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

4200 WILDWOOD PKWY.
ATLANTA, GA 30339

New Principal Place of Business:

Current Mailing Address:

PO BOX 2216
SCHENECTADY, NY 123012216

New Mailing Address:

FEI Number: 35-1886526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: GILLIGAN, ROBERT C
Address: 6465 EAST JOHNS CROSSING
City-St-Zip: DULUTH, GA 30097

Title: TD () Delete
Name: SCHWEER, KEN
Address: 4200 WILDWOOD PARKWAY
City-St-Zip: ATLANTA, GA 30339

Title: SD () Delete
Name: NUNEZ, FELIPE
Address: 4200 GILLIGAN PKWY
City-St-Zip: ATLANTA, GA 30339

Title: VAT () Delete
Name: CAMERON, BARBARA A
Address: 12 CORPORATE WOODS BLVD.
City-St-Zip: ALBANY, NY 12211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GILLIGAN, ROBERT C
Address: 6465 EAST JOHNS CROSSING
City-St-Zip: DULUTH, GA 30097

Title: D (X) Change () Addition
Name: SCHWEER, KEN
Address: 4200 WILDWOOD PARKWAY
City-St-Zip: ATLANTA, GA 30339

Title: S (X) Change () Addition
Name: NUNEZ, FELIPE
Address: 4200 GILLIGAN PKWY
City-St-Zip: ATLANTA, GA 30339

Title: VP (X) Change () Addition
Name: CAMERON, BARBARA A
Address: 12 CORPORATE WOODS BLVD.
City-St-Zip: ALBANY, NY 12211

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA CAMERON

VP

04/14/2008

Electronic Signature of Signing Officer or Director

_____ Date