

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005380

1. Entity Name

SOUTHERN COMPANY ENERGY SOLUTIONS, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90363 014 ***150.00

Principal Place of Business

Mailing Address

241 RALPH MCGILL BLVD NE
ATLANTA GA 30338

%AUDRA L MCCLELLAN
270 PEACHTREE STREET
ATLANTA GA 30303-1340

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-1646715

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS BEASON, ROBERT S
CITY-ST-ZIP 241 RALPH MCGILL BLVD
ATLANTA GA 30308

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME PD
STREET ADDRESS BERTRAM, SEARS E
CITY-ST-ZIP 241 RALPH MCGILL BLVD NE
ATLANTA GA 30338

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VPGM
STREET ADDRESS THAMES, THOMAS R
CITY-ST-ZIP 241 RALPH MCGILL BLVD NE
ATLANTA GA 30338

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME D
STREET ADDRESS MARTIN, ALAN C
CITY-ST-ZIP 270 PEACHTREE ST
ATLANTA GA 30303

TITLE ☐ Change ☒ Addition
NAME DIT
STREET ADDRESS Allen L. Leverett
CITY-ST-ZIP 270 Peachtree ST, N.W.
ATLANTA, GA 30303

TITLE ☒ Delete
NAME D
STREET ADDRESS FLETCHER, J. KEVIN
CITY-ST-ZIP 241 RALPH MCGILL BLVD NE
ATLANTA GA 30338

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Gale E. Klappa
CITY-ST-ZIP 270 Peachtree ST, N.W.
ATLANTA, GA 30303

TITLE ☐ Delete
NAME ASTS
STREET ADDRESS DABBS, SAM H JR
CITY-ST-ZIP 270 PEACHTREE STREET
ATLANTA GA 30303

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SAM H. DABBS JR. 4/18/00 404-506-

Date

Daytime Phone #

CR2E034 (9/99)