

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002596

1. Entity Name

VIRGINIA ELECTRIC AND POWER COMPANY

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90196 004 ***150.00

Principal Place of Business

Mailing Address

701 EAST CARY ST
 RICHMOND VA 23219

P.O. BOX 26666
 RICHMOND VA 23261-6666

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

54-0418825

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM INC.
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ADAMS JR, JOHN B	
STREET ADDRESS	ONE BOWMAN DRIVE	
CITY-ST-ZIP	FREDERICKSBURG VA	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	ASKEW, NORMAN B. M.	
STREET ADDRESS	701 EAST CARY STREET	
CITY-ST-ZIP	RICHMOND VA 23219	
TITLE	V.	<input type="checkbox"/> Delete
NAME	RIGSBY, ROBERT E	
STREET ADDRESS	701 EAST CARY STREET	
CITY-ST-ZIP	RICHMOND VA	
TITLE	VS	<input type="checkbox"/> Delete
NAME	FARRELL, THOMAS F II	
STREET ADDRESS	701 EAST CARY STREET	
CITY-ST-ZIP	RICHMOND VA	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BETTS, JAMES F	
STREET ADDRESS	201 EAST FRANKLIN STREET	
CITY-ST-ZIP	RICHMOND VA	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LAMBERT III, BENJAMIN J	
STREET ADDRESS	904 NORTH FIRST STREET	
CITY-ST-ZIP	RICHMOND VA	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Capps, Thomas E.	
STREET ADDRESS	100 Tredegar St.	
CITY-ST-ZIP	Richmond, VA 23219	
TITLE	V/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Wilkerson, Patricia A.	
STREET ADDRESS	100 Tredegar St.	
CITY-ST-ZIP	Richmond, VA 23219	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	120 Tredegar St.	
CITY-ST-ZIP	Richmond, VA 23219	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Roach, Jr., Edgar M.	
STREET ADDRESS	625 Liberty Ave.	
CITY-ST-ZIP	Pittsburgh, PA 15222	
TITLE	V/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hetzer, G. Scott	
STREET ADDRESS	100 Tredegar St.	
CITY-ST-ZIP	Richmond, VA 23219	

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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-20-00

804-819-2121

CR2E034 (9/99)