

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90019 011 ***150.00

DOCUMENT # F96000002596

1. Entity Name

VIRGINIA ELECTRIC AND POWER COMPANY

Principal Place of Business

Mailing Address

**701 EAST CARY ST
 RICHMOND VA 23219**

**P.O. BOX 26666
 RICHMOND VA 23261**

919940



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **54-0418825**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

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

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, 2001 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 **D** ☒ Delete
 NAME **ADAMS JR, JOHN B**
 STREET ADDRESS **ONE BOWMAN DRIVE**
 CITY-ST-ZIP **FREDERICKSBURG VA**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Thos. E. Capps**
 STREET ADDRESS **100 Tredegar Street**
 CITY-ST-ZIP **Richmond, VA 23219**

TITLE **P** ☒ Delete
 NAME **ASKEW, NORMAN B. M.**
 STREET ADDRESS **701 EAST CARY STREET**
 CITY-ST-ZIP **RICHMOND VA 23219**

TITLE **Director & CEO** ☐ Change ☒ Addition
 NAME **Edgar M. Roach, Jr.**
 STREET ADDRESS **625 Liberty Avenue**
 CITY-ST-ZIP **Pittsburgh, PA 15222**

TITLE **V** ☐ Delete
 NAME **RIGSBY, ROBERT E**
 STREET ADDRESS **701 EAST CARY STREET**
 CITY-ST-ZIP **RICHMOND VA**

TITLE **P & COO** ☒ Change ☐ Addition

TITLE **VS** ☐ Delete
 NAME **FARRELL, THOMAS F II**
 STREET ADDRESS **701 EAST CARY STREET**
 CITY-ST-ZIP **RICHMOND VA**

TITLE **Director & CEO** ☒ Change ☐ Addition
 NAME **120 Tredegar Street**
 STREET ADDRESS **Richmond, VA 23219**

TITLE **D** ☒ Delete
 NAME **BETTS, JAMES F**
 STREET ADDRESS **201 EAST FRANKLIN STREET**
 CITY-ST-ZIP **RICHMOND VA**

TITLE **P & COO** ☐ Change ☒ Addition
 NAME **James P. O'Hanlon**
 STREET ADDRESS **120 Tredegar Street**
 CITY-ST-ZIP **Richmond, VA 23219**

TITLE **D** ☒ Delete
 NAME **LAMBERT III, BENJAMIN J**
 STREET ADDRESS **904 NORTH FIRST STREET**
 CITY-ST-ZIP **RICHMOND VA**

TITLE **VP and Corporate Secretary** ☐ Change ☒ Addition
 NAME **Patricia A. Wilkerson**
 STREET ADDRESS **100 Tredegar Street**
 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:

Patricia A. Wilkerson **P.A. Wilkerson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/1/01

804-819-2120

CR2E034 (10/00)