

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000005395

1. Entity Name

GEORGIA POWER COMPANY

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90065 028 ***150.00

Principal Place of Business

Mailing Address

241 RALPH MCGILL BOULEVARD
ATLANTA GA 30308-3374
US

241 RALPH MCGILL BOULEVARD
ATLANTA GA 30308-3374
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 **58-0257110**

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

HAUBEIN, ROBERT H JR
INTERCESSION CITY PLANT
6525 OSCEOLA/POLK LINE RD.
INTERCESSION CITY FL 33848

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 NAME STREET ADDRESS CITY-ST-ZIP	PCEO AMOS, DANIEL P 1932 WYNNTON RD. COLUMBUS GA 31999	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BARANCO, JUANITA P 7060 JONESBORO RD MORROW GA 30260	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC FICKLING, WILLIAM A JR 577 MULBERRY ST., #1100 MACON GA 31202-1976	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO FRANKLIN, H A 241 RALPH MCGILL BLVD., BIN 10240 ATLANTA GA 30308-3374	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP JOBE, WARREN Y 270 PEACHTREE ST., BIN 926 ATLANTA GA 30303	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIENTZ, JAMES R JR 600 PEACHTREE ST., N.E., 55TH FLOOR ATLANTA GA 30302-4899	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice Pres. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman of the Bd & CEO ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & COO ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	270 Peachtree St., Bin 909 Atlanta, GA 30303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President and CEO ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ratcliffe, David M. 241 Ralph McGill Blvd., Bin 10240 Atlanta, GA 30308-3374
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 #

1/24/2000 205257 7980

CR2034 (9/99)