

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 06, 2001 08:00 AM**
Secretary of State**DOCUMENT # F97000005395**1. Entity Name
GEORGIA POWER COMPANY

Principal Place of Business 241 RALPH MCGILL BOULEVARD ATLANTA GA 303083374 US	Mailing Address 241 RALPH MCGILL BOULEVARD ATLANTA GA 303083374 US
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2. Principal Place of Business	3. Mailing Address 241 RALPH MCGILL BOULEVARD
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Suite, Apt. #, etc.	Suite, Apt. #, etc. BIN 10230
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City & State	City & State ATLANTA GA
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Zip	Country	Zip	Country
303083374	US	303083374	US

4. FEI Number 58-0257110	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**HAUBEIN ROBERT HJR**
INTERCESSION CITY PLANT
6525 OSCEOLA/POLK LINE RD.
INTERCESSION CITY FL
33848 US**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 _____ **02/06/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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 State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	P	☐ Delete
NAME	LIENTZ JAMES RJR	
STREET ADDRESS	600 PEACHTREE ST., N.E., 55TH FLOOR	
CITY-ST-ZIP	ATLANTA GA 303024899	
TITLE	EVP	☐ Delete
NAME	JOBE WARREN Y	
STREET ADDRESS	270 PEACHTREE ST., BIN 926	
CITY-ST-ZIP	ATLANTA GA 30303	
TITLE	PCOO	☐ Delete
NAME	FRANKLIN H A	
STREET ADDRESS	270 PEACHTREE ST. BIN 909	
CITY-ST-ZIP	ATLANTA GA 30303	
TITLE	CB	☐ Delete
NAME	FICKLING WILLIAM AJR	
STREET ADDRESS	577 MULBERRY ST., #1100	
CITY-ST-ZIP	MACON GA 312021976	
TITLE	EVP	☐ Delete
NAME	BARANCO JUANITA P	
STREET ADDRESS	7060 JONESBORO RD	
CITY-ST-ZIP	MORROW GA 30260	
TITLE	PCEO	☐ Delete
NAME	AMOS DANIEL P	
STREET ADDRESS	1932 WYNNTON RD.	
CITY-ST-ZIP	COLUMBUS GA 31999	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CB	☒ Change ☐ Addition
NAME	HARDMAN LAM GIII	
STREET ADDRESS	P. O. BOX 149	
CITY-ST-ZIP	COMMERCE GA 30529	
TITLE	PCEO	☒ Change ☐ Addition
NAME	RATCLIFFE DAVID M	
STREET ADDRESS	241 RALPH MCGILL BLVD., BIN 10230	
CITY-ST-ZIP	ATLANTA GA 303083374	
TITLE	PCOO	☒ Change ☐ Addition
NAME	FRANKLIN H A	
STREET ADDRESS	270 PEACHTREE ST., BIN 909	
CITY-ST-ZIP	ATLANTA GA 30303	
TITLE	CB	☒ Change ☐ Addition
NAME	FICKLING WILLIAM AJR	
STREET ADDRESS	P. O. BOX 1976	
CITY-ST-ZIP	MACON GA 312021976	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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: DAVID M. RATCLIFFE**PCEO 02/06/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)