2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005395

Entity Name: GEORGIA POWER COMPANY

FILED Mar 06, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
241 RALPH MCGILL BOULEVARD ATLANTA, GA 303083374 US				241 RALPH MCGILL BOULEVARD NE BIN 10120 ATLANTA, GA 303083374 US			
Current Mailing Address:				New Mailing Address:			
241 RALPH MCGILL BOULEVARD BIN 10120 - CORPORATE SECRETARY DEPT ATLANTA, GA 303083374 US			241 RALPH MCGILL BOULEVARD NE BIN 10120 ATLANTA, GA 303083374 US				
FEI Number: 58-0257110 FEI Number Applied For () FEI Number			mber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
6525 OSCE INTERCES	SION CITY PL EOLA/POLK LII SION CITY, FL named entity s	NE RD.	rpose o	of changing it	ts registered of	fice or registered a	agent, or both,
SIGNATUR		o o o o o o o o o o o o o o o o o o o				Data	
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution ().						Date	
Election Carr	ipaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CABLIK, ANNA F	FERRY ROAD, SUITE T20		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	C () USSERY, RICHA 1600 FIRST AVE COLUMBUS, GA	ENUE		Title: Name: Address: City-St-Zip:	R (X) USSERY, RICHA 6867 MOUNTAIN COLUMBUS, GA	IBROOK DRIVE	
Title: Name: Address: City-St-Zip:	PCEO () BROWN, ROBE 250 E. PONCE I DECATUR, GA	DE LEON		Title: Name: Address: City-St-Zip:	BROWN, ROBE	DE LEON 8TH FLOOR	:
Title: Name: Address: City-St-Zip:	RATCLIFFE, DA	BLVD NW, BIN SC1500		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	GARRETT, MICH	GILL BLVD., BIN 10240		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	PCEO () VEREEN, WILLI 301 RIVERSIDE MOULTRIE, GA	DRIVE		Title: Name: Address: City-St-Zip:	PCEO (X) VEREEN, W. J 301 RIVERSIDE MOULTRIE, GA		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS E. JONES SRVP 03/06/2008