

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005395

FILED
Mar 05, 2009
Secretary of State

Entity Name: GEORGIA POWER COMPANY

Current Principal Place of Business:

241 RALPH MCGILL BOULEVARD NE
BIN 10120
ATLANTA, GA 303083374 US

New Principal Place of Business:

Current Mailing Address:

241 RALPH MCGILL BOULEVARD NE
BIN 10120
ATLANTA, GA 303083374 US

New Mailing Address:

FEI Number: 58-0257110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, DOUGLAS E
INTERCESSION CITY PLANT
6525 OSCEOLA/POLK LINE RD.
INTERCESSION CITY, FL 33848 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CABLIK, ANNA R
Address: 1513 JOHNSON FERRY ROAD, SUITE T20
City-St-Zip: MARIETTA, GA 30062

Title: R () Delete
Name: USSERY, RICHARD W
Address: 6867 MOUNTAINBROOK DRIVE
City-St-Zip: COLUMBUS, GA 31904

Title: PCEO () Delete
Name: BROWN, ROBERT L JR.
Address: 250 E. PONCE DE LEON 8TH FLOOR
City-St-Zip: DECATUR, GA 30030

Title: PCEO () Delete
Name: RATCLIFFE, DAVID M
Address: 30 IVAN ALLEN BLVD NW, BIN SC1500
City-St-Zip: ATLANTA, GA 30308

Title: PCEO () Delete
Name: GARRETT, MICHAEL D
Address: 241 RALPH MCGILL BLVD., BIN 10240
City-St-Zip: ATLANTA, GA 303083374

Title: PCEO () Delete
Name: VEREEN, W. J
Address: 301 RIVERSIDE DRIVE
City-St-Zip: MOULTRIE, GA 317688603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

03/05/2009

Electronic Signature of Signing Officer or Director

Date