

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000990

1. Entity Name

THE GEORGIA RURAL ELECTRIC SERVICE CORPORATION

Principal Place of Business

602 EAST MARION ST.  
REYNOLDS GA 31076-9501

Mailing Address

602 EAST MARION ST.  
REYNOLDS GA 31076-9810

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 58-0828261

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, JAMES L  
3765 SUFFOLK DR.  
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

Name

Freemon R. Bell

Street Address (P.O. Box Number is Not Acceptable)

3403 N.E. 37th Place

City

Wildwood

FL

Zip Code  
34785

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

TITLE C ☐ Delete  
NAME HENRY, RALEIGH  
STREET ADDRESS 1367 HWY. 341 SOUTH  
CITY-ST-ZIP BARNESVILLE GA 30204

TITLE C ☐ Delete  
NAME BULLOCK, GARY  
STREET ADDRESS 155 TEMPLE RD.  
CITY-ST-ZIP CARROLLTON GA 30117

TITLE P ☐ Delete  
NAME THORNE, JERE T  
STREET ADDRESS 1716 FOXWOOD GLEN  
CITY-ST-ZIP CONYERS GA 30208

TITLE ST ☐ Delete  
NAME CRENSHAW, RANDY  
STREET ADDRESS 108 FOREST CT.  
CITY-ST-ZIP FITZGERALD GA 31750

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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: JERE T. THORNE - PRESIDENT/CEO  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/14/00

Date

800/329-3421

Daytime Phone #

FILED  
Jan 21, 2000 8:00 am  
Secretary of State

01-21-2000 90116 022 \*\*\*150.00

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DO NOT WRITE IN THIS SPACE

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