## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400000375

Entity Name: GULF POWER TRANSFORMERS, INC.

FILED Jan 14, 2008 Secretary of State

Current Principal Place of Business:				Navy Dring	inal Diago of I	3i	
				New Principal Place of Business:			
ONE ENER PENSACC	RGY PLACE DLA, FL				RGY PLACE PLA, FL 32520	US	
Current Mailing Address:				New Mailing Address:			
ONE ENERGY PLACE PENSACOLA, FL				ONE ENERGY PLACE PENSACOLA, FL 32520 US			
FEI Number:	: 20-0802269	FEI Number Applied For ( )	FEI Nur	nber Not Appl	licable ( )	Certificate of Status Desir	red ( )
Name and	Address of	Current Registered Agent:		Name and	Address of N	ew Registered Agent:	
	. BERNARD RGY PLACE DLA, FL	US			ENTINA C RGY PLACE DLA, FL 32520	US	
	named entity e of Florida.	submits this statement for the	purpose o	f changing i	ts registered of	fice or registered agent	t, or both,
SIGNATURE: BENTINA C. TERRY						01/14/2008	
	Electro	nic Signature of Registered Ag	ent			Date	
OFFICERS	S AND DIREC	CTORS:		ADDITION	IS/CHANGES	TO OFFICERS AND D	IRECTOR!
Title: Name: Address: City-St-Zip:	D ( CUEVAS, KEI 11999 PATE S PENSACOLA,	TREET		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	WILSON, CAL 75 N. PACE B	) Delete _VD FL 325057965		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SPANGENBER 1230 EAST 15			Title: Name: Address: City-St-Zip:	SPANGENBERG 1230 EAST 15 S	STREET	
Title: Name: Address: City-St-Zip:	D ( HUTCHINSON ONE ENERGY PENSACOLA,	PLACE		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( HEINFELD, BF 4300 HWY 23 SOUTHPORT,	00		Title: Name: Address: City-St-Zip:	D (X) HEINFELD, BRI/ 4300 HWY 2300 SOUTHPORT, F	)	
Title: Name: Address: City-St-Zip:	SIMS, SANDR 140 HOLLYW	) Delete A DOD BLVD SW N BEACH, FL 32548		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN L. HUTCHINSON D 01/14/2008