

2025 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P21000049581

Entity Name: PEOPLES GAS SYSTEM, INC.**Current Principal Place of Business:**3600 MIDTOWN DR
TAMPA, FL 33607**Current Mailing Address:**P.O. BOX 111
TAMPA, FL 33601 US**FEI Number:** 37-2066517**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NICHOLSON, DAVID M
3600 MIDTOWN DR
TAMPA, FL 33607 US*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**Officer/Director Detail :**

Title	VP-LEGAL
Name	NICHOLSON, DAVID M
Address	3600 MIDTOWN DR
City-State-Zip:	TAMPA FL 33607

Title	TREASURER
Name	BLUNDEN, GREG
Address	3600 MIDTOWN DR
City-State-Zip:	TAMPA FL 33607

Title	CHAIRMAN, DIRECTOR
Name	BALFOUR, SCOTT
Address	3600 MIDTOWN DR
City-State-Zip:	TAMPA FL 33607

Title	VP-ENGINEERING, CONSTRUCTION AND TECHNOLOGY
Name	RICHARD, CHRISTIAN
Address	3600 MIDTOWN DR
City-State-Zip:	TAMPA FL 33607

Title	P, CEO
Name	WESLEY, HELEN
Address	3600 MIDTOWN DR
City-State-Zip:	TAMPA FL 33607

Title	SECRETARY
Name	SZEKERES, MICHELLE
Address	3600 MIDTOWN DR
City-State-Zip:	TAMPA FL 33607

Title	VP- SAFETY OPERATIONS AND SUSTAINABILITY
Name	O'CONNOR, TIMOTHY
Address	3600 MIDTOWN DR
City-State-Zip:	TAMPA FL 33607

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE SZEKERES**SECRETARY****08/20/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date