

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005526

Entity Name: AGL SERVICES COMPANY OF GEORGIA**Current Principal Place of Business:**10 PEACHTREE PLACE NE
LOCATION 1466
ATLANTA, GA 30309**Current Mailing Address:**10 PEACHTREE PLACE NE
LOCATION 1466
ATLANTA, GA 30309**FEI Number:** 58-2570546**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	PD
Name	SOMERHALDER, JOHN WII
Address	10 PEACHTREE PLACE NE - LOCATION 1466
City-State-Zip:	ATLANTA GA 30309

Title	EVPD
Name	SHLANTA, PAUL R
Address	10 PEACHTREE PLACE NE - LOCATION 1466
City-State-Zip:	ATLANTA GA 30309

Title	EVPD
Name	EVANS, ANDREW E
Address	10 PEACHTREE PLACE NE - LOCATION 1466
City-State-Zip:	ATLANTA GA 30309

Title	T
Name	CAVE, L. STEPHEN
Address	10 PEACHTREE PLACE NE - LOCATION 1466
City-State-Zip:	ATLANTA GA 30309

Title	S
Name	BIERRIA, MYRA C
Address	10 PEACHTREE PLACE NE - LOCATION 1466
City-State-Zip:	ATLANTA GA 30309

Title	AS
Name	CHRISTOPHER, BARBARA P
Address	10 PEACHTREE PLACE NE - LOCATION 1466
City-State-Zip:	ATLANTA GA 30309

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: BARBARA P. CHRISTOPHERASSISTANT
CORPORATE
SECRETARY

04/22/2014

Electronic Signature of Signing Officer/Director Detail

Date

