

1.) CORPORATION NAME:

**SCANA Energy Marketing, Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**SC**

DUE DATE: **12/31/2011**

SCC ID NO: **F1161415**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 220 OPERATION WAY D133

CITY/ST/ZIP: CAYCE, SC 29033-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: GEORGE BULLWINKEL JR  
TITLE: PRESIDENT  
ADDRESS: 220 OPERATION WAY  
CITY/ST/ZIP/CO: CAYCE, SC 29033-

OFFICER       DIRECTOR

NAME: ROBERT EDWARDS  
TITLE: VICE PRESIDENT  
ADDRESS: 220 OPERATION WAY  
CITY/ST/ZIP/CO: CAYCE, SC 29033-

OFFICER       DIRECTOR

NAME: WILLIAM B TIMMERMAN  
TITLE: CEO  
ADDRESS: 220 OPERATION WAY  
CITY/ST/ZIP/CO: CAYCE, SC 29033-

OFFICER       DIRECTOR

NAME: JIMMY E ADDISON  
TITLE: SRVP/CFO  
ADDRESS: 220 OPERATION WAY  
CITY/ST/ZIP/CO: CAYCE, SC 29201-

OFFICER       DIRECTOR

NAME: GINA S CHAMPION  
TITLE: SECRETARY  
ADDRESS: 220 OPERATION WAY  
CITY/ST/ZIP/CO: CAYCE, SC 29201-

OFFICER       DIRECTOR

NAME:	BILL L. AMICK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	JAMES BENNETT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	SHARON A. DECKER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	D. MAYBANK HAGOOD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	JOSHUA MARTIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	JAMES MICALI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	LYNNE MILLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	JAMES ROQUEMORE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	MACEO SLOAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		
NAME:	HAROLD STOWE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 OPERATION WAY		
CITY/ST/ZIP/CO:	CAYCE, SC 29033-		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ GINA S CHAMPION</u>	<u>GINA S CHAMPION, SECRETARY</u>	<u>11/17/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.