

AGL RESOURCES INC  
Form 4/A  
March 10, 2005

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
PLATT MELANIE M

(Last) (First) (Middle)

TEN PEACHTREE PLACE

(Street)

ATLANTA, GA 30309

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
AGL RESOURCES INC [ATG]

3. Date of Earliest Transaction  
(Month/Day/Year)  
09/02/2004

4. If Amendment, Date Original Filed(Month/Day/Year)  
09/02/2004

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)

Sr. VP, Human Resources

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			Code	V Amount (A) or (D) Price			
Common Stock	09/02/2004		M	8,090 A \$ 19	16,474.766 (1)	D (2)	
Common Stock	09/02/2004		F(3)	5,000 D \$ 30.74	11,474.766 (1)	D (2)	
Common Stock	09/02/2004		S	3,090 D \$ 30.85	8,384.766 (1)	D (2)	
Common Stock					6,720	I	By 401(k) plan.

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned**  
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 19	09/02/2004		M	8,090	08/31/2001 08/31/2010	Common Stock	8,090
Employee Stock Option (right to buy)	\$ 30.74	09/02/2004		A <sup>(4)</sup>	5,000	03/02/2005 08/31/2010	Common Stock	5,000

## Reporting Owners

Reporting Owner Name / Address	Relationships
PLATT MELANIE M TEN PEACHTREE PLACE ATLANTA, GA 30309	Director 10% Owner Officer Sr. VP, Human Resources

## Signatures

Myra Coleman, by power of attorney  
03/10/2005

\_\_Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Includes 95.035 shares allocated to reporting person's account on September 1, 2004, pursuant to a dividend reinvestment feature of the AGL Resources Inc. Direct Stock Purchase and Dividend Reinvestment Plan.

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- (2) Shares owned jointly with husband.
- (3) Shares swapped pursuant to Nonqualified Stock Option agreement dated 8/31/00.
- (4) Reload options received as a result of the 9/2/04 exercise of options for 8,090 shares, whereby 5,000 shares were swapped for options pursuant to the Nonqualified Stock Option agreement dated 8/31/00.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.