



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Non-Profit
Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 001028388

2. Name of Corporation SMARTPOWER, INC.

3. State of Incorporation

State: CT

4. Corporate Address in Rhode Island

No. and Street: 1120 CONNECTICUT AVENUE NW, SUITE
1040

City or Town: WASHINGTON, DC

State: RI Zip: 20036Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 1120 CONNECTICUT AVE NW, STE 1040

City or Town: WASHINGTON State: DC Zip: 20036 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO HELP CUSTOMERS USE ADOPT AND INVEST IN CLEAN ENERGY AND ENERGY EFFICIENCY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	BRIAN KEANE	1120 CONNECTICUT AVE NW, STE 1040 WASHINGTON, DC 20036 USA
CHIEF FINANCIAL OFFICER	THOMAS KEANE	1120 CONNECTICUT AVE NW, STE 1040 WASHINGTON, DC 20036 USA
DIRECTOR	DOUGLAS FOY	1120 CONNECTICUT AVE NW, STE 1040 WASHINGTON, DC 20036 USA

DIRECTOR	THOMAS RAWLS	1120 CONNECTICUT AVE NW, STE 1040 WASHINGTON, DC 20036 USA
DIRECTOR	GARY SIMON	1120 CONNECTICUT AVE NW, STE 1040 WASHINGTON, DC 20036 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 11 Day of May, 2016 at 12:17:36 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By RYAN NELSON
Signature of Authorized Person

Form No. 631
Revised 09/07

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