



State of Rhode Island
Department of State - Business Services Division

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 R.I. DEPT. OF STATE
 BUS SVCS DIV

Annual Report for the year: 2023
 Corporation

2023 MAR -7 PM 3:46

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 001707755		2. Exact name of the Corporation Actual Energy Inc.				
3. Principal Office Address 74 Route 6A			City Sandwich	State MA	Zip 02563	
4. NAICS Code 221122		6. Brief description of the character of business conducted in Rhode Island Retail Energy Supply				
5. State of Incorporation DE						
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>						
President Name Mark Finley			Vice-President Name			
Street Address 8 River Road			Street Address			
City Sandwich	State MA	Zip 02563	City	State	Zip	
Secretary Name			Treasurer Name Jay Corn			
Street Address			Street Address 10225 Eagle Feather Place			
City	State	Zip	City Littleton	State CO	Zip 80125	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>						
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES	
			2909394		Common	.001
			142000		Preferred	.001
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.						
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
Name of Authorized Representative Rachel E Baier					Date 02/28/2023	
Signature of Authorized Representative 					FILED	

MAR 07 2023

BY FSAHK

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