

1.) CORPORATION NAME:

SHARP ENERGY, INC.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F0605263**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 909 SILVER LAKE BLVD

CITY/ST/ZIP: DOVER, DE 19904

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:	S ROBERT ZOLA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	909 SILVER LAKE BLVD		
CITY/ST/ZIP/CO:	DOVER, DE 19904		

NAME:	BETH W COOPER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	S/CFO		
ADDRESS:	909 SILVER LAKE BLVD		
CITY/ST/ZIP/CO:	DOVER, DE 19904		

NAME:	MICHAEL P MCMASTERS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHRMN/CEO		
ADDRESS:	909 SILVER LAKE BLVD		
CITY/ST/ZIP/CO:	DOVER, DE 19904		

NAME:	MATTHEW M. KIM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	909 SILVER LAKE BOULEVARD		
CITY/ST/ZIP/CO:	DOVER, DE 19904		

NAME:	ELAINE B. BITTNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	909 SILVER LAKE BOULEVARD		
CITY/ST/ZIP/CO:	DOVER, DE 19904		

NAME:	THOMAS E. MAHN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	909 SILVER LAKE BOULEVARD		
CITY/ST/ZIP/CO:	DOVER, DE 19904		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RALPH J. ADKINS DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN R. SCHIMKAITIS DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EUGENE H. BAYARD DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD BERNSTEIN DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS J. BRESNAN DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS P HILL, JR DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DENNIS S. HUDSON, III DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL L. MADDOCK, JR. DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J. PETER MARTIN DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH E. MOORE DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DIANNA F. MORGAN DIRECTOR 909 SILVER LAKE BOULEVARD DOVER, DE 19904	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	CALVERT A. MORGAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	909 SILVER LAKE BOULEVARD		
CITY/ST/ZIP/CO:	DOVER, DE 19904		

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.

/s/ MATTHEW M.KIM	MATTHEW M.KIM,	5/1/2013
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.