

1.) CORPORATION NAME:

**Global Enercom Management, Inc.**

DUE DATE: **8/31/2011**

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**

SCC ID NO: **F1389115**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1220 OLD ALPHARETTA ROAD  
STE 390

CITY/ST/ZIP: ALPHARETTA, GA 30005-

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: MIKE MCGANNON  
TITLE: PRESIDENT  
ADDRESS: 1220 OLD ALPHARETTA ROAD  
STE 390  
CITY/ST/ZIP/CO: ALPHARETTA, GA 30005-

OFFICER

DIRECTOR

NAME: JAMES H HADDOX  
TITLE: VP/AS  
ADDRESS: 2800 POST OAK BLVD SUITE 2600  
CITY/ST/ZIP/CO: HOUSTON, TX 77056-3023

OFFICER

DIRECTOR

NAME: DERRICK A JENSEN  
TITLE: VP/AS  
ADDRESS: 2800 POST OAK BLVD SUITE 2600  
CITY/ST/ZIP/CO: HOUSTON, TX 77056-3023

OFFICER

DIRECTOR

NAME: CAROLYN M CAMPBELL  
TITLE: SECRETARY  
ADDRESS: 2800 POST OAK BLVD STE 2600  
CITY/ST/ZIP/CO: HOUSTON, TX 77056-3023

OFFICER

DIRECTOR

NAME: PETER B O'BRIEN  
TITLE: VP/AS  
ADDRESS: 2800 POST OAK BLVD  
STE 2600  
CITY/ST/ZIP/CO: HOUSTON, TX 77075-

OFFICER

DIRECTOR

NAME: TANA L POOL TITLE: VP/AS ADDRESS: 2800 POST OAK BLVD STE 2600 CITY/ST/ZIP/CO: HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: NICHOLAS M GRINDSTAFF TITLE: TREASURER ADDRESS: 2800 POST OAK BLVD STE 2600 CITY/ST/ZIP/CO: HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: THOMAS C. HARTER TITLE: EXEC. VP ADDRESS: 1220 OLD ALPHARETTA RD STE 390 CITY/ST/ZIP/CO: HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DOUGLAS H WILSON TITLE: EXEC. VP ADDRESS: 1220 OLD ALPHARETTA RD STE 390 CITY/ST/ZIP/CO: ALPHARETTA, GA 30005-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
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/ CAROLYN M CAMPBELL</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>CAROLYN M CAMPBELL,</u> SECRETARY PRINTED NAME AND CORPORATE TITLE	<u>7/29/2011</u> 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.		