

1.) CORPORATION NAME:

FirstEnergy Solutions Corp.

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1410275**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	750

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 341 WHITE POND DRIVE

CITY/ST/ZIP: AKRON, OH 44320

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: DONALD R SCHNEIDER TITLE: PRESIDENT ADDRESS: 76 SOUTH MAIN STREET CITY/ST/ZIP/CO: AKRON, OH 44308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RHONDA S FERGUSON TITLE: VP/CORP SEC ADDRESS: 76 SOUTH MAIN STREET CITY/ST/ZIP/CO: AKRON, OH 44308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: MARK T CLARK TITLE: EXEC VP/FIN/ST ADDRESS: 76 SOUTH MAIN STREET CITY/ST/ZIP/CO: AKRON, OH 44308	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LEILA L VESPOLI TITLE: EXVP/GC ADDRESS: 76 SOUTH MAIN STREET CITY/ST/ZIP/CO: AKRON, OH 44308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ANTHONY J ALEXANDER TITLE: DIRECTOR ADDRESS: 76 SOUTH MAIN ST CITY/ST/ZIP/CO: AKRON, OH 44308	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES F PEARSON TITLE: SR VP/CFO ADDRESS: 76 SOUTH MAIN STREET CITY/ST/ZIP/CO: AKRON, OH 44308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: STEVEN R STAUB TITLE: VP/TREASURER ADDRESS: 76 SOUTH MAIN STREET CITY/ST/ZIP/CO: AKRON, OH 44308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: DANIEL M DUNLAP TITLE: ASST SECRETARY ADDRESS: 76 SOUTH MAIN STREET CITY/ST/ZIP/CO: AKRON, OH 44308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ DONALD R SCHNEIDER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DONALD R SCHNEIDER, PRESIDENT PRINTED NAME AND CORPORATE TITLE	2/20/2013 DATE
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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.