

SCC eFile
(6/10)

2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

211508732

1.) CORPORATION NAME:

DUE DATE: **6/30/2011**

Commonwealth Electric Company of the Midwest

SCC ID NO: **F1671181**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

NATIONAL REGISTERED AGENTS INC

4001 North Ninth Street, Suite 227

ARLINGTON, VA 22203

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	40,000
COMB	30,000
COMC	80,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1901 "Y" ST STE 100
PO BOX 80638

CITY/ST/ZIP: LINCOLN, NE 68501-0638

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.

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:		DAVID F FIRESTONE		
TITLE:		P/CEO		
ADDRESS:		4925 GLENEAGLE COURT		
CITY/ST/ZIP/CO:		LINCOLN, NE 68526-		

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:		PATRICK A CAMPBELL		
TITLE:		EXEC/VP		
ADDRESS:		3901 E WINSLOW AVE		
CITY/ST/ZIP/CO:		PHOENIX, AZ 85040-		

	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:		NORMAN L STENTZ		
TITLE:		VICE PRESIDENT		
ADDRESS:		3235 S 31ST ST		
CITY/ST/ZIP/CO:		LINCOLN, NE 68502-		

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:		GLEN A MOSS		
TITLE:		SEC/TRE/CFO		
ADDRESS:		882 N LAKESHORE DRIVE		
CITY/ST/ZIP/CO:		LINCOLN, NE 68528-		

	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:		DANIEL T SHANNON		
TITLE:		VICE PRESIDENT		
ADDRESS:		15222 S 14TH PL		
CITY/ST/ZIP/CO:		PHOENIX, AZ 85048-		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY R DEMMEL VICE PRESIDENT 545 SO 249TH CIRCLE WATERLOO, IA 68069-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
--	---	---	-----------------------------------

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	T MICHAEL PRICE VICE PRESIDENT 1540 ROSEMAN BRIDGE RD WINTERSET, IA 50273-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
--	---	---	-----------------------------------

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAY S HOOBLER VICE PRESIDENT 5293 W HEMATITE PL TUCSON, AZ 85742-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
--	--	---	-----------------------------------

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES G GRAHAM VICE PRESIDENT 20507 N LEMON DROP DR MARICOPA, AZ 85239-	<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.

/s/ GLEN A MOSS	GLEN A MOSS, SEC/TRE/CFO	4/28/2011
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.