

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000845

Entity Name: ENERGY DISPATCH, LLC**Current Principal Place of Business:**3225 CUMBERLAND BLVD
SUITE 100
ATLANTA, GA 30339**Current Mailing Address:**3225 CUMBERLAND BLVD
SUITE 100
ATLANTA, GA 30339**FEI Number:** 58-2355217**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name BOLCH, SUSAN
Address 1250 SPYGLASS LANE
City-State-Zip: NAPLES FL 34102

Title MGRM
Name BOLCH MORAN, ALLISON
Address 3225 CUMBERLAND BLVD SUITE 100
City-State-Zip: ATLANTA GA 30339

Title MGRM
Name LENKER, MAX
Address 3225 CUMBERLAND BLVD SUITE 100
City-State-Zip: ATLANTA GA 30339

Title MGRM
Name DUMBACHER, ROBERT J
Address 3225 CUMBERLAND BLVD SUITE 100
City-State-Zip: ATLANTA GA 30339

Title MGRM
Name AKERS, JOSEPH H
Address 3225 CUMBERLAND BLVD SUITE 100
City-State-Zip: ATLANTA GA 30339

Title MANAGER
Name BOLCH, CARL E JR.
Address 1250 SPYGLASS LANE
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name MORHOUS, NATALIE BOLCH
Address 3225 CUMBERLAND BLVD, STE 100
City-State-Zip: ATLANTA GA 30339

Title DIRECTOR
Name BOLCH, MELANIE C
Address 3225 CUMBERLAND BLVD
SUITE 100
City-State-Zip: ATLANTA GA 30339

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT J. DUMBACHER

CFO

04/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	DIRECTOR
Name	BOLCH, JORDAN B
Address	3225 CUMBERLAND BLVD SUITE 100
City-State-Zip:	ATLANTA GA 30339