

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000006489

**Entity Name:** AVANGRID SERVICE COMPANY**Current Principal Place of Business:**ONE CITY CENTER  
5TH FL.  
PORTLAND, ME 04101**Current Mailing Address:**ONE CITY CENTER  
5TH FL.  
PORTLAND, ME 04101 US**FEI Number:** 02-0706408**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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

**Officer/Director Detail :**

Title CEO, PRESIDENT, DIRECTOR, CHAIR  
Name STEMPIEN, CATHERINE S  
Address 100 MARSH HILL RD  
City-State-Zip: ORANGE CT 06477

Title GENERAL COUNSEL, SECRETARY,  
DIRECTOR, VP  
Name KINSCH, NOELLE M  
Address 80 STATE ST 12 FL  
City-State-Zip: ALBANY NY 12210

Title VP, CONTROLLER AND TREASURER  
Name VANLULING, ANDREA  
Address ONE CITY CENTER  
5TH FL.  
City-State-Zip: PORTLAND ME 04101

Title VP, DIRECTOR  
Name EVES, CHARLES JR  
Address 100 MARSH HILL RD  
City-State-Zip: ORANGE CT 06477

Title VP  
Name BAKER, SCOTT  
Address 100 MARSH HILL ROAD  
City-State-Zip: ORANGE CT 06477

Title DIRECTOR  
Name PATTERSON, KYRA  
Address 180 MARSH HILL ROAD  
City-State-Zip: ORANGE CT 06477

Title SENIOR VICE PRESIDENT OF  
OPERATIONS  
Name BIGI, THIAGO  
Address 100 MARSH HILL ROAD  
City-State-Zip: ORANGE CT 06477

Title VP, PROJECTS  
Name COLE, JAMES  
Address 100 MARSH HILL ROAD  
City-State-Zip: ORANGE CT 06477

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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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NOELLE M. KINSCH**SECRETARY****05/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SENIOR VICE PRESIDENT  
Name DONNELLY, KEVIN  
Address 100 MARSH HILL ROAD  
City-State-Zip: ORANGE CT 06477

Title VP, GAS OPERATIONS  
Name LANGLAND, ALBERT C.  
Address ONE CITY CENTER  
5TH FL.  
City-State-Zip: PORTLAND ME 04101

Title DIRECTOR  
Name LAGASSE, JUSTIN  
Address ONE CITY CENTER  
5TH FL.  
City-State-Zip: PORTLAND ME 04101

Title VP, HUMAN RESOURCES  
Name ULLMAN, TINA  
Address 180 MARSH HILL ROAD  
City-State-Zip: ORANGE CT 06477

Title VP, BUSINESS DEVELOPMENT  
Name LIBONATTI, JUAN SEBASTIAN  
Address ONE CITY CENTER 5 FL  
City-State-Zip: PORTLAND ME 04101