

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000936

Entity Name: DELAWARE SOLARCITY CORPORATION**Current Principal Place of Business:**3055 CLEARVIEW WAY
SAN MATEO, CA 94402**Current Mailing Address:**3055 CLEARVIEW WAY
SAN MATEO, CA 94402**FEI Number:** 02-0781046**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T 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**Officer/Director Detail :**

Title SECRETARY
Name WEISSMAN, SETH
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Title PRESIDENT, CEO, DIRECTOR
Name RIVE, LYNDON
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Title CFO
Name SERRA, TANGUY
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Title DIRECTOR
Name FISHER, JOHN
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Title DIRECTOR
Name MEHN, HANS
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Title DIRECTOR
Name MUSK, ELON
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Title DIRECTOR
Name PFUND, NANCY
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Title DIRECTOR
Name RIVE, PETER
Address 3055 CLEARVIEW WAY
City-State-Zip: SAN MATEO CA 94402

Continues on page 2

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: SETH WEISSMAN**SECRETARY****04/01/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STRAUBEL, JEFFREY B.
Address	3055 CLEARVIEW WAY
City-State-Zip:	SAN MATEO CA 94402