

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000004881

Entity Name: TRICON ENERGY, INC.**Current Principal Place of Business:**777 POST OAK BLVD
SUITE 550
HOUSTON, TX 77056**Current Mailing Address:**777 POST OAK BLVD
SUITE 550
HOUSTON, TX 77056 US**FEI Number:** 76-0502110**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 TREASURER
Name GUANICH, FRED
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

Title DIRECTOR
Name LOCKWOOD, BRAD
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

Title VP
Name ELWOOD, BRYAN
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

Title PRESIDENT
Name TORRAS MERCADOR, IGNACIO
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

Title DIRECTOR
Name ELWOOD, BRYAN
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

Title SECRETARY
Name DI BLASI, ANGELA
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

Title VP
Name MORRIS, BRIAN
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

Title CHIEF COMPLIANCE OFFICER
Name ELWOOD, BRYAN
Address 777 POST OAK BLVD
 SUITE 550
City-State-Zip: HOUSTON TX 77056

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: MORRIS BRIAN

VICE PRESIDENT

02/27/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title GENERAL COUNSEL
Name ELWOOD, BRYAN
Address 777 POST OAK BLVD
SUITE 550
City-State-Zip: HOUSTON TX 77056

Title CHIEF RISK OFFICER
Name ASHCROFT, ANDREW
Address 777 POST OAK BLVD
SUITE 550
City-State-Zip: HOUSTON TX 77056

Title DIRECTOR
Name TORRAS MERCADOR, IGNACIO
Address 777 POST OAK BLVD
SUITE 550
City-State-Zip: HOUSTON TX 77056

Title CFO
Name MORRIS, BRIAN
Address 777 POST OAK BLVD
SUITE 550
City-State-Zip: HOUSTON TX 77056

Title CHIEF ACCOUNTING OFFICER &
COMPTROLLER
Name MUECKE, SCOTT
Address 777 POST OAK BLVD
SUITE 550
City-State-Zip: HOUSTON TX 77056

Title DIRECTOR
Name MORRIS, BRIAN
Address 777 POST OAK BLVD
SUITE 550
City-State-Zip: HOUSTON TX 77056