

Control Number: 49779



Item Number: 1447

Addendum StartPage: 0



ELECTRICITY BROKER REGISTRATION FORM G C

RECEIVED NAY 1 2 2020

PROJECT NO. 49779

1. Check the most appropriate box to describe this submission:			
This is a new broker registration			
☐ This supplies information for a pending broker registration			
☐ This amends an existing, completed broker registration			
Provide an explanation of the amendment:			
2. Authorized Representative or Attorney to contact about this application:			
Name Jerry Shawn McBride Title Owner broker			
Business Address 4508 April (+			
City Mansfield State TX Zip 76063			
Telephone Number 817-475-4908			
Email Address Shawnmcbe sbeglobal. net			
3. Registering Entity: List the registering entity's legal name, business address, and telephone number.			
Name Jerry Shawn McBride			
Business address 4508 Ann Ct.			
City Mansfield State Tx Zip 76063			
Telephone Number 817-475-4908			
4. Type of organization of registering entity:			
Sole proprietor Other			
□ Corporation			
☐ Limited Liability Company, L.L.C			
☐ Limited Partnership			

Broker Restration Form
Last Updated August 8, 2019

5. Description of the br	okerage services provided by the	registering entity and type of customers served.
Description of Services	electricity b	roker
Types of Customers: C	,	
		□ Other
Residential Commercial	IndustrialMunicipalities	LI Other
6. Other Names. List listed in #3 above, under	any trade, commercial, and doing	z-business-as (d b a) names, other than the legal name ends to operate. Any name in which a corporation
intends to operate must	be registered with the Secretary	of State.
1 st		2 nd
3 rd	4 th	5 th
7. Officers. Provide, a	Attachment A, the names, bus	siness addresses, email addresses, and phone numbers of
	officers, directors, and partners.	as applicable.
☐ Attachment A		has and associated by the englander service.
department. If the regi	stering entity does not have a dec	ber and email address of the customer service licated customer service department, then provide the
		er of the customer service contact person. Email Address
Customer Service Department	E11-415-490	8 shawnmcb@sbcglobal.net
Name Jerry	Shawn McBride	Title
Business address	1508 Ann Ct.	
City Mansheld	State TX	76063
Telephone Number	817-475-490	8
Email Address SV	nawn mcb@sb	cgiobal net
9. Regulatory contact	t person. List the name, physica	al business address, telephone number, and email address
for a regulatory contac	t person.	Title C
Name David	Shavi	Title Senior Business Development mg
	221 Lamer St. #	
City Houston	State	Zip 77010
Telephone Number	113-354-0684	
Email Address	vid . Shawe co	instellation. com

10. Secretary of State Record. Entities who must register with the Secretary of State must provide a copy of the certificate of status issued by the Texas Secretary of State certifying that the registering entity is authorized to transact business in Texas.

Copy of Secretary of State certificate of status is attached.

AFFIDAVIT

My name is Jerry Shawn. I am the OWNER Worker of the Registering Entity.
I swear or affirm that I have personal knowledge of the facts stated in the attached registration, that I am competent to testify to them, and that I have the authority to submit this application form on behalf of the registering entity. I further swear or affirm that all statements made in the Registration Form are true, correct and complete and that any substantial changes in such information will be provided to the Public Utility Commission of Texas in a timely manner. I swear or affirm that the registering entity understands and will comply with all requirements of the applicable law and rules, including customer protection
provisions, disclosure requirements, and marketing guidelines for retail electric service.
Signature of Registering Entity's Owner, Partner, or Officer
Printed Name McBride
Name of Registering Entity
Sworn and subscribed before me this 25th day of March, 2020
Notary Public in and For the State of TEXAS My commission expires on
My commission expires on