

FILE
FILE

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11-03-EL-RPT

COMPETITIVE RETAIL ELECTRIC SERVICE

(check all that apply):

- AGGREGATOR
- GOVERNMENTAL AGGREGATOR
- POWER MARKETER
- RETAIL ELECTRIC GENERATION PROVIDER
- POWER BROKER

INTRASTATE ANNUAL REPORT

OF

Village of LaGrange, Ohio

(Exact legal name of respondent)

PUCO

2011 APR -7 PM 5:24

RECEIVED-DOCKETING DIV

If name was changed during the year, show also the previous name and date of change.

355 South Center Street, LaGrange, Ohio 44050

(Address of principal business office at end of year)

TO THE
PUBLIC UTILITIES COMMISSION OF OHIO



FOR THE
YEAR ENDED DECEMBER 31, 2010

Name, title address and telephone number (including area code) of the person to be contacted concerning this report.

Walt Sukey, Village Administrator, 355 South Center Street, LaGrange, Ohio 44050
Email: lagov@windstream.net Telephone: 440-355-5555

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.
Technician AK Date Processed APR 07 2011

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IDENTITY OF RESPONDENT

1. State whether respondent is a corporation, a joint stock association, a firm or partnership, or an individual.
Municipal Government

2. Identify names of affiliate and subsidiary companies of the respondent.

3. Date when respondent began operations in Ohio.

4. If a consolidated or merged company, give names of each such incident, date, and Commission authority. If a reorganized company, give name of original corporation.

5. If incorporated specify (a) Date of filing articles of incorporation,
(b) State in which incorporated,

6. Ohio certificate number, case number granting authority and date issued.
09-432-EL-GAG 09-156E(1)

7. State whether or not the respondent during the year conducted any part of its business under a name or names other than that shown on Title Page. If so, give full particulars.

8. Description of Ohio service territory served by respondent.
Village of LaGrange

IMPORTANT CHANGES DURING THE YEAR

Report important changes of the types listed. Except as otherwise indicated, data furnished should apply to the same period the report covers. Answers should be numbered in accordance with the inquiries and if "none" states the fact, it should be used. If information, which answers an inquiry, is given elsewhere in the report, identification of the other answer will be sufficient.

1. Changes in ownership or control (shareholders holding 5% or more of outstanding stock).
2. Other important changes: Give brief particulars of each other important change, which is not disclosed elsewhere in this report.

*Please note any material changes that occurred during the year are also required to be filed in the respective CRES case docket (EL-CRS, EL-AGG, EL-GAG) pursuant to CRES Rule 4901:1-24-20.

**STATEMENT OF INTRASTATE
GROSS RECEIPTS AND KWH SALES**

| Customer Class | Sales (kWh) | Earnings(\$) |
|-----------------------|--------------------|---------------------|
| Residential | 0 | 0 |
| Commercial | 0 | 0 |
| Industrial | 0 | 0 |
| Other | 0 | 0 |
| Total | 0 | 0 |

Instructions:

This information is used for PUCO annual assessment purposes pursuant to Section 4905.10, Revised Code. The reporting company shall report its intrastate gross earnings for the provision of retail services (e.g. Retail Electric Generation, Broker, Marketer, Governmental Aggregator) for which it is subject to certification by the PUCO under Section 4928, Revised Code. In addition, power providers please provide all corresponding sales of kilowatt hours of electricity. Sales of kilowatt hours of electricity are deemed to occur at the meter of the retail customer.

The reporting company shall maintain supporting and/or subsidiary records to separately record receipts and sales of electricity derived from operations other than in Ohio. Information presented herein is subject to audit by the PUCO.

COMPANY CONTACTS

IN ORDER TO ENSURE THAT PUCO CORRESPONDENCE IS DIRECTED TO THE APPROPRIATE PERSON AT THE CORRECT ADDRESS, PLEASE COMPLETE THE FOLLOWING.

**Name, Title, Address, and Phone Number of the Company's Contact Persons
To Receive Entries and Orders from the Docketing Division**

Walt Sukey Village Administrator
Name Title
355 South Center Street, LaGrange, Ohio 44050
Address
440-355-5555
Phone Number (Including Area Code)
lagov@windstream.net
E-Mail Address

**Name, Title, Address, and Phone Number of Person to whom Invoice
Should be directed**

Walt Sukey Village Administrator
Name Title
355 South Center Street, LaGrange, Ohio 44050
Address
440-355-5555
Phone Number (Including Area Code)

Name and Address of the President

Kim E. Strauss Mayor
Name President
300 West Prospect Street, LaGrange, Ohio 44050
Address

VERIFICATION

The President or Chief Officer of the company must verify the foregoing report. The oath required may be taken before any person authorized to administer an oath by the laws of the State in which the same is taken.

OATH

State of Ohio

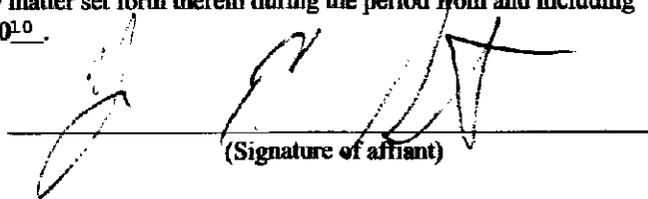
County of Lorain

Kim E. Strauss makes oath and says that
(Insert here the name of the affiant)

he is Mayor
(Insert here the official title of deponent)

of Village of LaGrange
(Insert here the exact legal title or name of the respondent)

that he has examined the foregoing report; that to the best of his knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent in respect to each and every matter set forth therein during the period from and including January 1, 2010, to and including December 31, 2010.


(Signature of affiant)