RI SOS Filing Number: 201436789600 Date: 03/05/2014 10:20 AM

Amended

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 • **This report must be typed or printed legibly.**
Filing Fee: $50.00 • **FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation		
161519	**Defender Security Company**		
3. Principal office address: **3750 Priority Way S. Drive Ste 200**	City: **Indianapolsi**	State: **IN**	Zip: **46240**
4. Business Phone No.: **317-713-8094**	5. State of Incorporation: **Indiana**		
6. Brief description of the character of business conducted in Rhode Island: **Security system sales and installation**			

SECRETARY OF STATE CORPORATIONS DIV 2014 MAR -5 AM 10:20

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name: **David Lindsey**			Vice-President Name: **Mark Colucci**		
Street Address: **3750 Priority Way S. Drive Ste 200**			Street Address: **3750 Priority Way S. Drive Ste 200**		
City: **Indianapolis**	State: **IN**	Zip: **46240**	City: **Indianapolis**	State: **IN**	Zip: **46240**
Secretary Name: **Mark Colucci**			Treasurer Name: **Bart Shroyer**		
Street Address: **3750 Priority Way S. Drive Ste 200**			Street Address: **3750 Priority Way S. Drive Ste 200**		
City: **Indianapolis**	State: **In**	Zip: **46240**	City: **Indianapolis**	State: **IN**	Zip: **46240**

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

SECRETARY OF STATE CORPORATIONS DIV 2014 FEB 24 AM 10:17

9. SHARES AUTHORIZED	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	0		

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____
Check No _____
By: _____

FOR SECRETARY OF STATE USE ONLY

FILED
MAR 05 2014
By A.A. 10:20 AM

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Carrington Kujawski 2/21/2014
Signature of Authorized Representative Date

Carrington Kujawski
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012

State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

March 05, 2014 10:20 AM

A. RALPH MOLLIS

Secretary of State

103602-1-916257