RI SOS Filing Number: 201857913950 Date: 2/8/2018 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018

Corporation

→ Filing period: January 1 - March 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by April 1.

1. Entity ID Number	2. Exact name of the Corporation			
7275	T.C.T.A. DATA SYSTEMS, INC.			
3. Principal Office Address		City	State	Zip
77 Contour Road		Warwick	RI	02886
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
541512	Design and market municipal computer programs			
5. State of Incorporation				
Rhode Island				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: Joseph Yates			Vice-President Name: None		
Street Address: 77 Contour Road			Street Address		
City: Warwick	State: RI	Zip: 02886	City	State	Zip
Secretary Name: Joseph Yates			Treasurer Name: Joseph Yates		
Street Address: 77 Contour Road			Street Address: 77 Contour Road		
City: Warwick	State: RI	Zip: 02886	City: Warwick	State: RI	Zip: 02886

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name: Joseph Yates			Director Name		
Street Address: 77 Contour Road			Street Address		
City: Warwick	State: RI	Zip: 02886	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized — 10. Shares Issued — Check the box to indicate an attachment ☑

This information is currently of record in the Department of State.

Changes require an additional filing.

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	Common	No Par Value

11. 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.

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.

Name of Authorized Representative	Date
Joseph Yates, President	1/31/2018

Signature of Authorized Representative: Joseph D Yates

FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FEB 08 2018
BY 249215

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