



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: **2019**  
Corporation

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

**FILED STAMP**

MAR 25 2019

USE ONLY

2041

1. Entity ID Number <b>000579397</b>		2. Exact name of the Corporation <b>Res-Com Security Inc.</b>			
3. Principal Office Address <b>80 Stubble Brook Road</b>			City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>
4. NAICS Code <b>444190</b>		6. Brief description of the character of business conducted in Rhode Island <b>Installation of security systems.</b>			
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name <b>Gregory Coutcher</b>			Vice-President Name <b>N/A</b>		
Street Address <b>80 Stubble Road</b>			Street Address		
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City	State	Zip
Secretary Name <b>Gregory Coutcher</b>			Treasurer Name <b>Antonietta Coutcher</b>		
Street Address <b>80 Stubble Brook Road</b>			Street Address <b>80 Stubble Brook Road</b>		
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name <b>Antonietta Coutcher</b>			Director Name <b>Gregory Coutcher</b>		
Street Address <b>80 Stubble Brook Road</b>			Street Address <b>80 Stubble Brook Road</b>		
City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>	City <b>West Greenwich</b>	State <b>RI</b>	Zip <b>02817</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State.		Check the box to indicate an attachment <input type="checkbox"/>			
Changes require an additional filing.		NUMBER OF SHARES <b>100</b>	CLASS/SERIES <b>Common</b>	PAR VALUE <b>None</b>	
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.					
<b>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.</b>					
Name of Authorized Representative <b>Gregory Coutcher</b>				Date <b>3/18/19</b>	
Signature of Authorized Representative 				SIGN DOCUMENT HERE	