S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S		
	Providence RI 0290		
HOPE	(401) 222-304	40	
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2019			
1. ID No. <u>000112146</u>			
2. Exact Name of the Limited Liability Company <u>ALTEC CAPITAL SERVICES, LLC</u>			
3. State of Formation			
State: <u>AL</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>522220</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
FINANCIAL SERVICES FOR THE CUSTOMERS OF OUR FAMILY OF COMPANIES			
5. Principal Office Addre	SS		
	VERNESS CENTER PKWY		
City or Town: <u>BIRMI</u>	<u>00</u> NGHAM	State: <u>AL</u> Zip: <u>35242</u> Cou	ntry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: 33 INVERNESS CENTER PKWY			
City or Town: <u>BIRMIN</u>		State: <u>AL</u> Zip: <u>35242</u> Cou	intry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country
MANAGER	ALTEC, INC.	210 INVERNESS CENT	ER DR

BIRMINGHAM, AL 35242 USA

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CAPITOL CORPORATE SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

## Signed this 25 Day of September, 2019 at 10:47:25 AM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

## By ELIZABETH HENDERSON

Signature of Authorized Person

Form No. 632 Revised 09/07

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