



Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

STAMP

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

FEB 09 2023

BY 2023/1/24
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| | | | |
|--|---|---|------------------------|
| 1. Entity ID Number 000014431 | | 2. Exact name of the Corporation National Security Corporation | |
| 3. Principal Office Address 65 Newport Avenue | | City East Providence | State RI |
| | | Zip 02916 | |
| 4. NAICS Code 541870 | 6. Brief description of the character of business conducted in Rhode Island Communications and Alarm Systems | | |
| 5. State of Incorporation RI | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | |
| President Name Christopher P. Morra | | Vice-President Name Christopher P. Morra, Jr. | |
| Street Address 65 Newport Avenue | | Street Address 65 Newport Avenue | |
| City East Providence | State RI | City East Providence | State RI |
| Secretary Name Christopher P. Morra | | Treasurer Name Christopher P. Morra | |
| Street Address 65 Newport Avenue | | Street Address 65 Newport Avenue | |
| City East Providence | State RI | City East Providence | State RI |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | |
| Director Name Christopher P. Morra | | Director Name | |
| Street Address 65 Newport Avenue | | Street Address | |
| City East Providence | State RI | City | State |
| Director Name | | Director Name | |
| Street Address | | Street Address | |
| City | State | City | State |
| 9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/> | | | |
| This information is currently of record in the Department of State. Changes require an additional filing. | | 10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/> | |
| | | NUMBER OF SHARES 100 | CLASS/SERIES Common |
| | | PAR VALUE 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. <i>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.</i> | | | |
| Name of Authorized Representative Christopher P. Morra | | Date 1/24/2023 | |
| Signature of Authorized Representative | | | |