



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

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

1. Entity ID Number 000098998		2. Exact name of the Corporation Korel Controls, Inc.			
3. Principal Office Address One Harry Street		City Cranston		State RI	Zip 02907
4. NAICS Code 333414		6. Brief description of the character of business conducted in Rhode Island Install and service data digital heating ventilation, air conditioning control systems.			
5. State of Incorporation RI		<i>Controls Contractor</i>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name James J. Bannon			Vice-President Name John F. Bannon		
Street Address One Harry Street			Street Address One Harry Street		
City Cranston	State RI	Zip 02907	City Cranston	State RI	Zip 02907
Secretary Name James A. Holland			Treasurer Name James J. Bannon		
Street Address One Harry Street			Street Address One Harry Street		
City Cranston	State RI	Zip 02907	City Cranston	State RI	Zip 02907
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name <i>James Bannon</i>			Director Name <i>John Bannon</i>		
Street Address <i>324 640 Mill Rd</i>			Street Address <i>34 Dearfield Dr</i>		
City <i>Charlton</i>	State <i>RI</i>	Zip <i>02810</i>	City <i>N. Scituate</i>	State <i>RI</i>	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <i>100</i> 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 <i>100</i> Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES 100	CLASS/SERIES Common Shares	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.					
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 James J. Bannon			Date <i>1/18/2024</i>		
Signature of Authorized Representative <i>[Signature]</i>			BY <i>[Signature]</i>		

MAIL TO:
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