| State of Rhode Island  | Fee: \$50.00        |  |  |  |  |  |
|--|---------------------|--|--|--|--|--|
| Office of the Secretary of State   |                     |  |  |  |  |  |
| Division Of Business Services  |                     |  |  |  |  |  |
| 148 W. River Street<br>Providence RI 02904-2615  |                     |  |  |  |  |  |
| <b>1636</b> (401) 222-3040   |                     |  |  |  |  |  |
| Foreign Business Corporation   |                     |  |  |  |  |  |
| Annual Report<br>Filing Period: February 1 - May 1   |                     |  |  |  |  |  |
|  |                     |  |  |  |  |  |
| In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law                             |                     |  |  |  |  |  |
| (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.   |                     |  |  |  |  |  |
| ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR <b>2024</b> : <u>2024</u>  |                     |  |  |  |  |  |
| 1. Corporate ID No. 001657566  |                     |  |  |  |  |  |
| 2. Name of Corporation Milestone Systems, Inc.   |                     |  |  |  |  |  |
| 3. Street Address Principal Business Office:   |                     |  |  |  |  |  |
| No. and Street: 5300 MEADOWS RD  |                     |  |  |  |  |  |
| SUITE 400  |                     |  |  |  |  |  |
| City or Town: <u>LAKE OSWEGO</u> State: <u>OR</u> Zip: <u>97035</u>  | Country: <u>USA</u> |  |  |  |  |  |
| 4. Business Phone No.  |                     |  |  |  |  |  |
|  |                     |  |  |  |  |  |
| 5. State of Incorporation  |                     |  |  |  |  |  |
|  |                     |  |  |  |  |  |
| State: <u>OR</u>   |                     |  |  |  |  |  |
| NAICS CODE   |                     |  |  |  |  |  |
| 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>511210</u>  |                     |  |  |  |  |  |
| 6. Brief Description of the Character of Business Conducted in Rhode Island  |                     |  |  |  |  |  |
|  |                     |  |  |  |  |  |
| SALE OF VIDEO SOFTWARE MANAGEMENT  |                     |  |  |  |  |  |
| 7. Names and Addresses of the Officers and Directors:  |                     |  |  |  |  |  |
| All officers and directors must be listed.   |                     |  |  |  |  |  |
|  |                     |  |  |  |  |  |
|  |                     |  |  |  |  |  |

| Title               | Individual Name             | Address   |  |
|---------------------|-----------------------------|---|--|
|                     | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |  |
| CFO                 | LARS LARSEN                 | 5300 MEADOWS RD SUITE 400                       |  |
|                     |                             | LAKE OSWEGO, OR 97035 USA                       |  |
| PRESIDENT, DIRECTOR | TIM PALMQUIST               | 5300 MEADOWS RD, SUITE 400                      |  |
|                     |                             | LAKE OSWEGO, OR 97035 USA                       |  |
| SECRETARY           | TIM PALMQUIST               | 5300 MEADOWS RD, SUITE 400                      |  |
|                     |                             | LAKE OSWEGO, OR 97035 USA                       |  |
| DIRECTOR            | THOMAS JENSEN               | 5300 MEADOWS RD, SUITE 400                      |  |
|                     |                             | LAKE OSWEGO, OR 97035 USA                       |  |
| DIRECTOR            | LARS LARSEN                 | 5300 MEADOWS RD SUITE 400                       |  |
|                     |                             | LAKE OSWEGO, OR 97035 USA                       |  |

## 8. Shares Authorized and Issued

|                |                 |               |                  | Total Issued |
|----------------|-----------------|---------------|------------------|--------------|
| Class of Stock | Series of Stock | Par Value Per | <b>-</b>         | and          |
|                |                 | Share         | Total Authorized | Outstanding  |
|                |                 |               | Shares           | Num of       |
|                |                 |               | Number of Shares | Shares       |
| СNР            |                 | \$0.0000      | 1,000.00         | 100          |

## 9. 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.

**Signed this 25 Day of April, 2024 at 7:23:29 AM.** *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.* 

## By **DESIREE BREAMER**

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved