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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025

Corporation

→ 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<br><b>000809984</b>   |   | 2. Exact name of the Corporation<br><b>CTI Federal Inc.</b>   |                       |
| 3. Principal Office Address<br><b>85 Lenihan Lane</b>   |   | City<br><b>East Greenwich</b>   | State<br><b>RI</b>    |
|   |   | Zip<br><b>02818</b>   |                       |
| 4. NAICS Code<br><b>541512</b>  | 6. Brief description of the character of business conducted in Rhode Island<br><b>COMMUNICATIONS AND AUDIO/VISUAL INTEGRATION SYSTEMS</b> |   |                       |
| 5. State of Incorporation<br><b>Rhode Island</b>  | Title: <b>7-1.2-1701</b>  |   |                       |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |   |   |                       |
| President Name<br><b>Brad Righi</b>   |   | Vice-President Name<br><b>Helen Morabit</b>   |                       |
| Street Address<br><b>85 Lenihan Lane</b>  |   | Street Address<br><b>85 Lenihan Lane</b>  |                       |
| City<br><b>East Greenwich</b>   | State<br><b>RI</b>  | City<br><b>East Greenwich</b>   | State<br><b>RI</b>    |
| Zip<br><b>02818</b>   |   | Zip<br><b>02818</b>   |                       |
| Secretary Name<br><b>Helen Morabit</b>  |   | Treasurer Name<br><b>Brad Righi</b>   |                       |
| Street Address<br><b>85 Lenihan Lane</b>  |   | Street Address<br><b>85 Lenihan Lane</b>  |                       |
| City<br><b>East Greenwich</b>   | State<br><b>RI</b>  | City<br><b>East Greenwich</b>   | State<br><b>RI</b>    |
| Zip<br><b>02818</b>   |   | Zip<br><b>02818</b>   |                       |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |   |   |                       |
| Director Name<br><b>Brad Righi</b>  |   | Director Name<br><b>Helen Morabit</b>   |                       |
| Street Address<br><b>85 Lenihan Lane</b>  |   | Street Address<br><b>85 Lenihan Lane</b>  |                       |
| City<br><b>East Greenwich</b>   | State<br><b>RI</b>  | City<br><b>East Greenwich</b>   | State<br><b>RI</b>    |
| Zip<br><b>02818</b>   |   | Zip<br><b>02818</b>   |                       |
| Director Name   |   | Director Name   |                       |
| Street Address  |   | Street Address  |                       |
| City  | State   | City  | State                 |
| Zip   |   | Zip   |                       |
| 9. Shares Authorized  |   | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                       |
| This information is currently of record in the Department of State.   |   | NUMBER OF SHARES  |                       |
| Changes require an additional filing.   |   | CLASS/SERIES  |                       |
|   |   | PAR VALUE   |                       |
|   |   | <b>1,000</b>  | <b>Common</b>         |
|   |   |   | <b>.10</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. |   |   |                       |
| 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<br><b>Brad Righi, President</b>   |   |   | Date<br><b>3-5-25</b> |
| Signature of Authorized Representative  |   |   |                       |

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MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02804-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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