

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000002617

Entity Name: THREAT X, INC.**Current Principal Place of Business:**363 CENTENNIAL PKWY., STE. 150
LOUISVILLE, CO 80027**Current Mailing Address:**363 CENTENNIAL PKWY., STE. 150
LOUISVILLE, CO 80027 US**FEI Number:** 47-2300857**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT

Name FAY, GENE

Address 104 ATLANTIC AVE

City-State-Zip: SEABROOK NH 03874

Title SECRETARY

Name SETTLE, EDWIN

Address 109 MONTURA DR

City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR

Name AXBEY, TOM

Address 3 WELLINGTON ST, UNIT 1

City-State-Zip: BOSTON MA 02118

Title DIRECTOR

Name DRACON, GREG

Address 470 ATLANTIC AVE, 12TH FLOOR

City-State-Zip: BOSTON MA 02210

Title DIRECTOR

Name FREDRICK, STEVE

Address 9722 GROFFS MILL DRIVE, SUITE 856

City-State-Zip: OWINGS MILLS MD 21117

Title DIRECTOR

Name MEDICINO, FRED

Address 8787 TURNPIKE DRIVE, SUITE 260

City-State-Zip: WESTMINSTER CO 80031

Title DIRECTOR

Name ROBERTS, TOM

Address 5702 GROVE AVENUE, SUITE 200

City-State-Zip: RICHMOND VA 23226

Title CFO

Name MERRILL, ELIZABETH

Address 124 FOREST STREET

City-State-Zip: WINCHESTER MA 22017

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH MERRILL**CFO****02/13/2024**

Electronic Signature of Signing Officer/Director Detail

Date