



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Foreign Business Corporation  
Annual Report

Filing Period: January 1 - March 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: 2017

1. Corporate ID No. 000074590

2. Name of Corporation DUCHARME, MCMILLEN & ASSOCIATES, INC.

3. Street Address Principal Business Office:

No. and Street: 828 S HARRISON STREET  
SUITE 650

City or Town: FORT WAYNE State: IN Zip: 46802 Country: USA

4. Business Phone No.

260-484-8631

5. State of Incorporation

State: IN

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

54

6. Brief Description of the Character of Business Conducted in Rhode Island

TO PROVIDE SPECIALIZED TAX AND BUSINESS CONSULTING SERVICES.

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
PRESIDENT	DAVID L MEINIKA	828 S HARRISON STREET, SUITE 650 FORT WAYNE, IN 46802 US

TREASURER	DAVID L MEINIKA	828 S HARRISON STREET, SUITE 650 FORT WAYNE, IN 46802 US
SECRETARY	ROGER WEITKAMP	3200 WINDY HILL ROAD, SUITE 300 WEST ATLANTA, GA 30339 US
CFO	CRAIG FITZPATRICK	828 S HARRISON STREET, SUITE 650 FORT WAYNE, IN 46802 US
DIRECTOR	JOHN MCMILLEN	6610 MUTUAL DRIVE FORT WAYNE, IN 46825 USA
DIRECTOR	N REED SILLIMAN	111 E. WAYNE ST FORT WAYNE, IN 46802 USA
DIRECTOR	DAVID L MEINIKA	828 S HARRISON STREET, SUITE 650 FORT WAYNE, IN 46802 US

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	1,000.00	10

**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 1 Day of February, 2017 at 8:32:56 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 ANGELA WHEELER  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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