



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year: 2017**

**Corporation**

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

**STAMP**

FOR

1. Entity ID Number <b>156698</b>		2. Exact name of the Corporation <b>Turning Point Survey Company, Inc.</b>										
3. Principal Office Address <b>100 Broadcommon Road</b>		City <b>Bristol</b>	State <b>RI</b>									
		Zip <b>02809</b>										
4. NAICS Code <b>54 - Professional, Scientific, an</b>	6. Brief description of the character of business conducted in Rhode Island <b>Providing professional land surveying services</b>											
5. State of Incorporation <b>Rhode Island</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 <b>David G. Greenhalgh</b>		Vice-President Name <b>Susan B. Greenhalgh</b>										
Street Address <b>26 Woodland Road</b>		Street Address <b>26 Woodland Road</b>										
City <b>Barrington</b>	State <b>RI</b>	Zip <b>02806</b>	City <b>Barrington</b>									
		State <b>RI</b>	Zip <b>02806</b>									
Secretary Name <b>Steven M. McInnis</b>		Treasurer Name <b>David G. Greenhalgh</b>										
Street Address <b>38 Bellevue Avenue, Suite H</b>		Street Address <b>26 Woodland Road</b>										
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Barrington</b>									
		State <b>RI</b>	Zip <b>02806</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 <b>David G. Greenhalgh</b>		Director Name										
Street Address <b>26 Woodland Road</b>		Street Address										
City <b>Barrington</b>	State <b>RI</b>	Zip <b>02806</b>	City									
		State	Zip									
Director Name		Director Name										
Street Address		Street Address										
City	State	Zip	City									
		State	Zip									
9. Shares Authorized <b>This information is currently of record in the Department of State.</b> <b>Changes require an additional filing.</b>		10. Shares Issued <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>										
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> <tr> <td><b>100</b></td> <td><b>Common</b></td> <td><b>\$.01Par</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>100</b>	<b>Common</b>	<b>\$.01Par</b>			
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<b>100</b>	<b>Common</b>	<b>\$.01Par</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. <b>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.</b>												
Name of Authorized Representative <b>David G. Greenhalgh</b>		Date <b>1/28/17</b>										
Signature of Authorized Representative		SIGN DOCUMENT HERE <i>David G. Greenhalgh</i>										

**MAR 02 2017**

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