



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

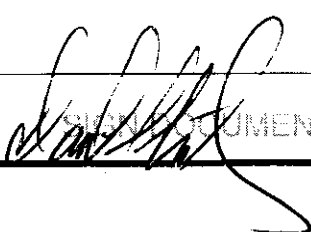
Annual Report for the year: **2017**

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

1. Entity ID Number 70846		2. Exact name of the Corporation Tallman Enterprises, Inc.			
3. Principal Office Address 392 Pine Street		City Pawtucket		State RI	Zip 02862
4. NAICS Code 53 - Real Estate and Rental anc		6. Brief description of the character of business conducted in Rhode Island Holding and Improving Real Estate			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☒					
President Name David Sheibley		Vice-President Name Gregory Wershing			
Street Address 31 Bramblewood Street		Street Address 812 Sierra Madre Way			
City Bridgewater	State MA	Zip 02324	City Davis	State CA	Zip 95618
Secretary Name Diane Sheibley		Treasurer Name David Sheibley			
Street Address 31 Bramblewood Street		Street Address 31 Bramblewood Street			
City Bridgewater	State MA	Zip 02324	City Bridgewater	State MA	Zip 02324
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Gregory Wershing		Director Name Stephen Wershing			
Street Address 812 Sierra Madre Way		Street Address 1745 Pinnacle Road			
City Davis	State CA	Zip 95618	City Henrietta	State NY	Zip 14467
Director Name Diane Sheibley		Director Name Cynthia Barry			
Street Address 31 Bramblewood Street		Street Address 3 Woodward Avenue			
City Bridgewater	State MA	Zip 02324	City Enfield	State CT	Zip 06082
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment ☐			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100	common	none	
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 DAVID SHEIBLEY				Date FEB 27, 2017	
Signature of Authorized Representative 				FILED	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

MAR 02 2017
BY **1236 DS**

FORM 630 - Revised: 10/2016

Tallman Enterprises Inc.
Attachment to Annual Report – 2017

Additional Officers:

Assistant Treasurer: Diane Sheibley
31 Bramblewood Street
Bridgewater, MA 02324

FILED

MAR 02 2017

BY

1236 DS #70846