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	2. Exact name of the Corporation
70846	Tallman Enterprises, Inc.

3. Principal Office Address	City	State	Zip
392 Pine Street	Pawtucket	RI	02862

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
53 - Real Estate and Rental anc	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

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

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	Date
DAVID SHEIBLEY	FEB 27, 2017

Signature of Authorized Representative: SIGN DOCUMENT HERE

FILED

MAR 02 2017

BY 123605

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

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