



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

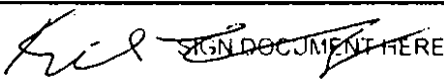
Annual Report for the year: **2019**
Corporation

- Filing period: January 1 - March 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED
STAMP

MAR 01 2019

BY **84569 OS**

1. Entity ID Number 596514		2. Exact name of the Corporation Hallam Associates Inc			
3. Principal Office Address 38 Eastwood Drive, Suite 200		City South Burlington		State VT	Zip 05403
4. NAICS Code 541512	6. Brief description of the character of business conducted in Rhode Island Engineering, commissioning, controls integration and any other legal corporate business activity				
5. State of Incorporation NH					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			1,000,000	Common	No Par Value
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 Keith P Flaherty				Date 02/21/2019	
Signature of Authorized Representative 				SIGN DOCUMENT HERE	

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

Entity #596514

Officers

VP/COB Jeffrey N Silcox
Street 33 Toledo Street
City/State/Zip Teaticket, MA 02536

President Keith P Flaherty
Street 69 Butler Drive
City/State/Zip S Burlington, VT 05403

VP/Treasurer Brenda S Matthews
Street 905 NW Carpathian Drive
City/State/Zip Corvallis, OR 97330-9562

VP/Secretary William E Neuburger
Street 38 Eastwood Dr Ste 200
City/State/Zip S Burlington, VT 05403

VP Peter T Niarchos
Street 308 Isham Circle
City/State/Zip Williston, VT 05495

VP Scott M King
Street 38 Eastwood Dr Ste 200
City/State/Zip S Burlington, VT 05403

Board Members

Name Jeffrey N Silcox
Street 33 Toledo Street
City/State/Zip Teaticket, MA 02536

Name Keith P Flaherty
Street 69 Butler Drive
City/State/Zip S Burlington, VT 05403

Name Brenda S Matthews
Street 905 NW Carpathian Drive
City/State/Zip Corvallis, OR 97330-9562

Name William E Neuburger
Street 38 Eastwood Dr Ste 200
City/State/Zip S Burlington, VT 05403

Name Peter T Niarchos
Street 308 Isham Circle
City/State/Zip Williston, VT 05495

Name Scott M King
Street 38 Eastwood Dr Ste 200
City/State/Zip S Burlington, VT 05403

Name Michael Powers
Street 41 Rivendell Way
City/State/Zip Thornton, NH 03285

Name Jamison Spalding
Street 38 Eastwood Dr Ste 200
City/State/Zip S Burlington, VT 05403

Name Don Roberts
Street 505-265 Westcourt Pl.
City/State/Zip Waterloo ON N2L 6E4

FILED

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BY 84869 DS
JP 596514