



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

FILED

Annual Report for the year **2020**
Corporation

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

FEB 03 2020

BY 2213 DS

1. Entity ID Number 000162158		2. Exact name of the Corporation Nathan W. Tilman, D.D.S., P.C.	
3. Principal Office Address 136 Broadway		City Newport	State RI
		Zip 02840	
4. NAICS Code 8021210	6. Brief description of the character of business conducted in Rhode Island Conduct the practice of dentistry		
5. State of Incorporation Rhode Island			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Nathan W. Tilman		Vice-President Name	
Street Address 136 Broadway		Street Address	
City Newport	State RI	Zip 02840	
Secretary Name Nathan W. Tilman		Treasurer Name Nathan W. Tilman	
Street Address 136 Broadway		Street Address 136 Broadway	
City Newport	State RI	Zip 02840	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
	Zip		Zip
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
	Zip		Zip
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 <input type="checkbox"/>	
		NUMBER OF SHARES	CLASS/SERIES
		0	common
			\$.01
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 Nathan W. Tilman		Date 1/23/2020	
Signature of Authorized Representative 		SIGN DOCUMENT HERE	