



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021

574

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

RECEIVED
RI DEPT OF STATE
BUS SVCS DIV

1. Entity ID Number 83248		2. Exact name of the Corporation Tilton & Associates, Inc.			
3. Principal Office Address 394 Cumberland Avenue			City North Attleboro	State MA	Zip 02761
4. NAICS Code 11-Agriculture 541715		6. Brief description of the character of business conducted in Rhode Island Land Surveying and Engineering services			
5. State of Incorporation Massachusetts					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Larry E. Tilton			Vice-President Name N/A		
Street Address 394 Cumberland Avenue			Street Address		
City North Attleboro	State MA	Zip 02761	City	State	Zip
Secretary Name Larry E. Tilton			Treasurer Name N/A		
Street Address 394 Cumberland Avenue			Street Address		
City North Attleboro	State MA	Zip 02761	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Larry E. Tilton			Director Name N/A		
Street Address 394 Cumberland Avenue			Street Address		
City North Attleboro	State MA	Zip 02761	City	State	Zip
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	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 ☐			
		NUMBER OF SHARES		CLASS/SERIES	
		200,000 A			
				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 Larry E. Tilton				Date 2/24/2021	
Signature of Authorized Representative 					

FILED

MAR 1 2021

BY QJ2ZEC5

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: 08/2020