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State of Rhode Island  
Department of State - Business Services Division

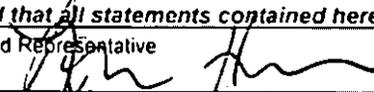
**FILED**

Annual Report for the year: 2021  
Corporation

MAR 16 2021

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

BY 2834

1. Entity ID Number <u>122875</u>		2. Exact name of the Corporation HERMAN & ASSOCIATES, INC.				
3. Principal Office Address 1445 WAMPANOAG TRAIL-SUITE 104			City EAST PROVIDENCE	State RI	Zip 02915	
4. NAICS Code 541110		6. Brief description of the character of business conducted in Rhode Island  LEGAL				
5. State of Incorporation RI						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
President Name LOUISE HERMAN			Vice-President Name			
Street Address 63 ADAMS POINT ROAD			Street Address			
City BARRINGTON	State RI	Zip 02806	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 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	
				COMMON		
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.						
<i>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.</i>						
Name of Authorized Representative 					Date 3/9/2021	
Signature of Authorized Representative LOUISE HERMAN						

**MAIL TO:**

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