

Annual Report for the year: 2019
Limited Liability Company

FILED NOV 2 0 2019

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→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

000159477	The Saf	ety Schoo				
		The Safety School, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
611519	Safety Train	ing				
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
110B Turnessa Drive			North Providence	RI	02904	
7. Mailing Address of Limited Lia	ability Compan	y and Name or				
Contact Name James Rodger			Contact Title Manager	Contact Title Manager		
Street Address 110B Turnessa Drive			City North Providence	State RI	^{Zip} 02904	
8. List ALL managers (names a	nd addresses)	of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST I	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
				Check the box to it	ndicate an attachment	
9. Resident Agent in Rhode Islai	nd. This informa	ation is currently	of record with the Department of State.	Changes require filin	g Form 642.	
Under penalty of perjury, I dec statements, and that all states			examined this report, including a true and correct.	any accompanyin	g schedules and	
Name of Authorized Person			2.2////	Date		
James Rodger (M	m		11/18/1	9	
Signature of Authorized Person				///	8/19	
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	/ ()			-	<i>:</i>	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov