RI SOS Filing Number: 202103818410 Date: 10/21/2021 4:00:00 PM



State of Rhode Island

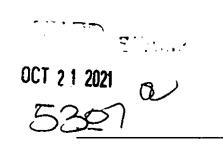
## **Department of State - Business Services Division**

## Annual Report for the year: 2021 Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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



1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
000122475	SAFE H	SAFE HARBOR CLINICAL RESEARCH, LLC				
3. NAICS Code	l l	Brief description of the character of business conducted in Rhode Island     MEDICAL RESEARCH				
621511	MEDICAL					
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
250 Eddie Dowling Highway, Suite #1			North Smithfield	RI	02896	
7. Mailing Address of Limited I		any and Name or		•		
Contact Name Linda M. Cannistra			Contact Title MEMBER			
Street Address 250 Eddie Dowling Highway, Suite #1			City North Smithfield	State RI	<sup>Zlp</sup> 02896	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		<del></del>		Check the box to	indicate an attachment	
9. The Resident Agent informa	tion currently	of record with the	RI Department of State is accurat	te. Changes requir	e filing Form 642.	
Under penalty of perjury, I d statements, and that all stat			examined this report, including a true and correct.	any accompanyin	g schedules and	
Name of Authorized Person				Date		
LINDA M. CANNISTRA				10-15-2021		
Signature of Authorized Perso		<i>J</i> .	· · · · · · · · · · · · · · · · · · ·			
(Xale)	n lin	nuska				

MAIL TO:

**Division of Business Services** 

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

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