



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: **2023**  
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

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R.I. DEPT. OF STATE  
BUS SVCS DIV.

2023 MAY 17 P 2:48

1. Entry ID Number <b>000136957</b>		2. Exact name of the Corporation <b>Lead Safe Inspections and Consulting, Inc.</b>			
3. Principal Office Address <b>PO Box 96</b>			City <b>Lincoln</b>	State <b>RI</b>	Zip <b>028655</b>
4. NAICS Code <b>562910</b>		6. Brief description of the character of business conducted in Rhode Island <b>Environmental Lead Inspections</b>			
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Sharon L. Barr</b>			Vice-President Name <b>John D. Barr, II</b>		
Street Address <b>14 Sir Charles Road</b>			Street Address <b>14 Sir Charles Road</b>		
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
Secretary Name <b>John D. Barr, II</b>			Treasurer Name <b>Sharon L. Barr</b>		
Street Address <b>14 Sir Charles Road</b>			Street Address <b>14 Sir Charles Road</b>		
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Sharon L. Barr</b>			Director Name <b>John D. Barr</b>		
Street Address <b>14 Sir Charles Road</b>			Street Address <b>14 Sir Charles Road</b>		
City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued		
			NUMBER OF SHARES <b>100</b>	CLASS/SERIES	PAR VALUE <b>No Par</b>
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. <b>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.</b>					
Name of Authorized Representative <b>John D. Barr, II</b>				Date	
Signature of Authorized Representative <i>John D. Barr II</i>					

FILED

MAY 17 2023

BY ML 1011