



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2025

Corporation

- Filing period: February 1 - May 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

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BY 1034

|                                                                                                                                                                                                                                                   |             |                                                                                                                          |                                            |              |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------|--------------|
| 1. Entity ID Number<br>1766433                                                                                                                                                                                                                    |             | 2. Exact name of the Corporation<br>Bayberry Home Solutions, Inc.                                                        |                                            |              |              |
| 3. Principal Office Address<br>81 Bayberry Road                                                                                                                                                                                                   |             | City<br>Woonsocket                                                                                                       |                                            | State<br>RI  | Zip<br>02895 |
| 4. NAICS Code<br>236220                                                                                                                                                                                                                           |             | 6. Brief description of the character of business conducted in Rhode Island<br>Construction and any other lawful purpose |                                            |              |              |
| 5. State of Incorporation<br>RI                                                                                                                                                                                                                   |             |                                                                                                                          |                                            |              |              |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                    |             |                                                                                                                          |                                            |              |              |
| President Name<br>Joseph Gadberry                                                                                                                                                                                                                 |             |                                                                                                                          | Vice-President Name<br>Roger Paquette, Jr. |              |              |
| Street Address<br>81 Bayberry Road                                                                                                                                                                                                                |             |                                                                                                                          | Street Address<br>81 Bayberry Road         |              |              |
| City<br>Woonsocket                                                                                                                                                                                                                                | State<br>RI | Zip<br>02895                                                                                                             | City<br>Woonsocket                         | State<br>RI  | Zip<br>02895 |
| Secretary Name<br>Roger Paquette, Jr.                                                                                                                                                                                                             |             |                                                                                                                          | Treasurer Name<br>Roger Paquette, Jr.      |              |              |
| Street Address<br>81 Bayberry Road                                                                                                                                                                                                                |             |                                                                                                                          | Street Address<br>81 Bayberry Road         |              |              |
| City<br>Woonsocket                                                                                                                                                                                                                                | State<br>RI | Zip<br>02895                                                                                                             | City<br>Woonsocket                         | State<br>RI  | Zip<br>02895 |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                                                   |             |                                                                                                                          |                                            |              |              |
| Director Name<br>Roger Paquette, Jr.                                                                                                                                                                                                              |             |                                                                                                                          | Director Name<br>Joseph Gadberry           |              |              |
| Street Address<br>81 Bayberry Road                                                                                                                                                                                                                |             |                                                                                                                          | Street Address<br>81 Bayberry Road         |              |              |
| City<br>Woonsocket                                                                                                                                                                                                                                | State<br>RI | Zip<br>02895                                                                                                             | City<br>Woonsocket                         | State<br>RI  | Zip<br>02895 |
| Director Name<br>None                                                                                                                                                                                                                             |             |                                                                                                                          | Director Name<br>None                      |              |              |
| 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                                                                                                                                                                                                                                 |             | Check the box to indicate an attachment <input type="checkbox"/>                                                         |                                            |              |              |
| NUMBER OF SHARES                                                                                                                                                                                                                                  |             | CLASS/SERIES                                                                                                             |                                            | PAR VALUE    |              |
| 200                                                                                                                                                                                                                                               |             | Common                                                                                                                   |                                            | No 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<br>Roger Paquette, Jr.                                                                                                                                                                                          |             |                                                                                                                          |                                            |              | Date         |
| Signature of Authorized Representative<br>                                                                                                                                                                                                        |             |                                                                                                                          |                                            |              |              |

MAIL TO:  
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