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
MAR 1 1 2025
BY

1. Entity ID Number	2. Exact name of the Corporation			
174626	PERFECTLY PROTECTED PRACTICE, INC.			
3. Principal Office Address		City	State	Zip
1307 AIRPORT RD, NORTH STE A1		FLOWOOD	MS	39232
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
812990				
5. State of Incorporation				
MS	NETWORK SERVICE			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name			Vice-President Name		
RAY FOXWORTH					
Street Address			Street Address		
386 LAKEWAY DRIVE					
City	State	Zip	City	State	Zip
BRANDON	MS	39047			
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 ☐

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 ☐

This information is currently of record in the Department of State.

Changes require an additional filing.

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	COMMON	1000

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: RAY FOXWORTH — Date: 3/5/25

Signature of Authorized Representative: RAY FOXWORTH

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