

APR 0 4 2025

Annual Report for the year: 2025 Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of the Limited Liability Company			
000508014	Barge & Associates, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
541618	for-profit and nonprofit business management consulting			
5. State of Formation	1			
Rhode Island				
6. Principal Office Address		City	State	Zip
69 Arbor Dr.		Providence	RI	02908
7. Mailing Address of Limited L	iability Company and Name	or Title of Contact Person		
Contact Name Denise A. Barge		Contact Title OWNEF		
Street Address 69 Arbor Dr.		City Providence	State RI	<sup>Zip</sup> 02908
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. 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 Person			Date	
Denise A. Barge			3-31-25	
Signature of Authorized Person	Altay			

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

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