



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$50.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

*Filing Period: February 1 - May 1*

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025:** 2025

**1. ID No.** 001780081

**2. Exact Name of the Limited Liability Company** ChangeMGMT, LLC

**3. State of Formation**

State: RI

**NAICS CODE**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

541519

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

CHANGEMGMT PROVIDES TECHNOLOGY CONSULTING SERVICES TO BUSINESSES SPECIFICALLY DESIGNED TO HELP MODERNIZE BUSINESSES BY IMPLEMENTING CUSTOM AI SOLUTIONS TO HELP THEM REMAIN COMPETITIVE. IT ALSO OFFERS VARIOUS INDEPENDENT CONTRACTING SERVICES BY THE CEO LINCOLN SCHOFIELD BASED ON HIS DYNAMIC BACKGROUND AND EXPERTISE OUTSIDE OF TECHNOLOGY.

**5. Principal Office Address**

No. and Street: 66 LAWTON AVENUE

City or Town: WESTERLY

State: RI Zip: 02891 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: LINCOLN SCHOFIELD Contact Title: CEO  
No. and Street: 66 LAWTON AVE  
City or Town: WESTERLY State: RI Zip: 02891 Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

LINCOLN SCHOFIELD 66 LAWTON AVENUE WESTERLY , RI 02891

**8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 1 Day of July, 2025 at 11:25:29 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By LINCOLN SCHOFIELD  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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