

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence. RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00

penalty fee of \$25.00. 1. Corporate ID No.	2 Name of Costs	oration						
27053	' '	2. Name of Corporation Barrington Democratic Club						
3. State of Incorporation		Iress in Rhode Island - Street A	Address	City'	Zip			
Rhode Island	186 Roffee			Barrington	02806			
5. Foreign corporation. Ent			City	State	Zip			
The control of the principal office sources			, i					
S Brief Description of the cha	racter of the affairs whic	b are actually conducted in RI	bode Island		•			
			_					
	ESSES OF THE OFF	FICERS: ("X" BOX FOR A	TTACHMENT) [FILL IN SPA	CES BEFORE USING ATTA	ACHMENTS			
President Name			Vice President Name					
Michael Mc Gill			John Di Piero					
Street Address			Street Address 33 Prospect ST.					
380 Franklin RD. ≎in	State	Zip	City	State	Zip			
Coventry	R.I.	02816	Barrington	R.I.	02806			
Secretary Name	17.1.	102010	Treasurer Name	1,1311	1 0			
Richard Doughty			Gerald Lucianoj					
Street Address			Street Address	· · · · · · · · · · · · · · · · · · ·				
Bullockts RD.			8751/2 H0pe Sreet					
City	State	Zip	City .	State	Zip			
Riverside	R.I.	02195	Bristol	R.I.	02809			
3. NAMES AND ADDR	ESSES OF THE DIR	ECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SPA	ACES BEFORE USING ATT	ACHMENTS			
THE NUMBER OF DIF	RECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION <u>SHALL</u>	NOT BE LESS THAN THE	<u>REE</u> (3). R.I.G.L. 7-0			
Director Name			Director Name					
Shalen Cardin			Scott Coie					
Street Address			Street Address					
Sherwood DR.			17 Harvey ST.					
City	State	Zip	City:	State	Zip			
Barrington R.I.	R.I.	02806	Riverside	R.I.	02915			
Director Name			Director Name					
Jerry Tobias			kevin Wright					
Street Address			Street Address Roffee ST.					
Willow way				State	Zip			
Äty Dannin atau	State	Zip	City Parrington	R _I I,	02806			
Barrington 9. REGISTERED AGEN	R.I.	02806	^l Barrington	$\int \mathbf{R}_i \mathbf{I}_i$	1 02000			
7. REGISTERED AGEN	I II KRODE ISLA	ND						
This information is sure	ently of record in th	e Office of the Secretary	of State. Changes require filing	of Form 641 - R.I.G.L. 7-6-	13/7-6-78			
This information is curt	oning or record in in	0 0,,,,,,,	or ormer commence and and anne					

villow way			Nonce of.		
itv -	State	Zip	City	State	Zip
arrington	ÌR.I.	02806	l Barrington	R,I,	02806
	ENT IN RHODE ISLANI	D .			
his information is cu	urrently of record in the	Office of the Secretary	of State. Changes require filing	g of Form 641 - R.I.G.L.	7-6-13/7-6-78
This rep	oort must be signed by e	ither the President, Vic	ce President, Secretary, Assist	tant Secretary, Treasure	r, Receiver or Trustee
			, , , , , , , , , , , , , , , , , , ,	•	
	27053				
	_/ 055		Under penalty	of perjury, I declare and	affirm that I have examined th
				ng any accompanying sche tained herein are true apd	dules and statements, and that a
	LILED		Statements cen	tanicu nerem are irue and	contect.
File Date	JUN 0 2 2009		Signature of Off	ales lice	G-xx X 3/25/1
24	DOM OF EDOR		Signature of Off		Dute
Check No.	N 199 J		<u> </u>	& Lacin	ND
By:	'J		Print or Type N	ame of Officer	
DOD CEODET	TARY OF STATE USE ONLY		1120	e Brice	
FOR SECRET	ARY OF STATE USE ONLY		Title of Officer		Form 631 Rev. 09/1
					rom 051 kev. 09/1