

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 2007

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.						
1. Corporate ID No.	2. Name of Corporation					
000027072	Barrington Pop Warner, Inc.					
3. State of Incorporation	4. Corporate ad	4. Corporate address in Rhode Island - Street Address			Zip	
RI	7 Riverside	e Drive		Barrington	02806	
5. Foreign corporation. Enter principal office address			City	State	Zip	
. 						
6. Brief Description of the charac	ter of the affairs which	ch are actually conducted in Ri	bode Island		.	
Manage and conduct business of youth football and cheer association (ages 7-15) affiliated with National Pop Warner youth football.						
7. NAMES AND ADDRES	SES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) FILL IN SPA	CES BEFORE USING ATT	ACHMENTS	
President Name			Vice President Name			
Kevin Ryan			Charles Miller			
Street Address			Street Address			
21 Harrison Ave			27 Manning Dr			
City	State	Zip	City	State	Zip	
Barrington	RI	02806	Barrington	RI	02806	
Secretary Name			Treasurer Name			
Mark Lishman			Mark Leach	Mark Leach		
Street Address			Street Address	l l		
16 Roberta Dr			16 Congress Rd			
City	State	Zip	City	State	Zip	
Barrington	RI	02806	Barrington	R l	02806	
			ATTACHMENT) FILL IN SPA			
	CTORS OF A DO	MESTIC (RHODE ISLA.	ND) CORPORATION SHALL	NOT BE LESS THAN THI	REE (3). R.I.G.L. 7-6-23	
Director Name				Director Name		
David Bonney			Kevin Ryan := 018			
Street Address			Street Address			
30 Bluff Rd		See above on the second				
City	State	Zip	City	State	E PAR	
Barrington	RI	02806				
Director Name			Director Name			
Charles Miller					N S S	
Street Address			Street Address			
27 Manning Dr	I com		au.	[' :		
City	State	Zip	City	State	Zip 🛴	
Barrington 9. REGISTERED AGENT 1	RI IN RHODE ISLA	02806	•			
/. REGISTERED AGENT	IN KHODE ISLA	1417				
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78						
This report m	ust be signed by	either the President, Vic	e President, Secretary, Assista	ant Secretary, Treasurer, Re	eceiver or Trustee	

	FILED 10:11			
File Date	FEB 1 6 2010			
Check No.	By 111046			
Ву:	FMC			
FOR SECRETARY OF STATE USE ONLY				

Under penalty of perjury, I declare and affirm that I have examined the
report, including any accompanying schedules and statements, and that a
statements contained herein are true and correct.

Duit Porus	
Signature of Officer Kevin F ZyAn	Date
Print or Type Name of Officer	