



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

2015

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 27034		2. Exact name of the Corporation Barrington Boosters Club, Inc.			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Support of intramural and interscholastic sports of the Barrington school system			
5. Principal office address 450 Veterans Memorial Parkway, Suite 103		City East Providence		State RI	Zip 02914
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Kevin Ryan		Vice-President Name Tom Rimoshytus			
Street Address 21 Harrison Avenue		Street Address 1 Howard Street			
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
Secretary Name Kristin Coogan		Treasurer Name Michael Orefice			
Street Address 7 Stone Tower Lane		Street Address 136 Rumstick Road			
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Anthony Arico		Director Name Ed Ionata			
Street Address 66 Lincoln Avenue		Street Address 26 First Street			
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
Director Name Tom Clancy		Director Name Christine Silva			
Street Address 22 Fairway Drive		Street Address 619 Maple Avenue			
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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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.

Signature of Officer or Authorized Representative

Date

Kevin F. Ryan
President

Print or Type Name of Officer or Authorized Representative

Barrington Boosters Club, Inc.
Entity ID No. 27034
Directors

David Hughes
3 Vero Court
Barrington, RI 02806

George Finn
220 Lincoln Avenue
Barrington, RI 02806

Joe Hurley
220 Lincoln Avenue
Barrington, RI 02806

Lori Coleman
8 Virginia Road
Barrington, RI 02806

Elizabeth Palko
3 Lafayette Road
Barrington, RI 02806

Anthony DeSisto
4 Oxford Road
Barrington, RI 02806

Camilla Hemingway
47 Hawthorne Avenue
Barrington, RI 02806

Heidi Dolan
5 Mathewson Lane
Barrington, RI 02806

John Marin
7 Chapman Lane
Barrington, RI 02806

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