State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **Non-Profit Corporation**

2018

STAFP

- → Filing period June 1 June 30 → Filing Fee \$20.00 → Penalty: Additional \$25.00 fee if form is not filed by July 30.

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Entity ID Number	2. Exact name of the Corporation				
000027031	THE BARRINGTON BAPTIST CHURCH				
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island				
RI	CHURCH MINISTRIES PLUS DAY CARE PROGRAM AND 8 WEEK DAY CAMP, EACH SPONSORED				
4. NAICS Code	BY THE BARRINGTON BAPTIST CHURCH				
813110 - Religious Organizatio					
6. Principal Office Address			City	State	Zip
OLD COUNTY ROAD			BARRINGTON	RI	02806
7. List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name ERIC D'AGOSTINO			Vice-President Name RICK PELTZ-STEELE		
Street Address 30 STATE STREET, FLOOR 2			Street Address 380 MAPLE AVENUE		
City WARREN	State RI	Zip 02885	City BARRINGTON	State RI	^{Zip} 02806
Secretary Name NONE			Treasurer Name CINDY WEINREBE		
Street Address			Street Address 13 LITTLE ST		
City	State	Zip	City RUMFORD	State RI	Zip 02916
8 List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment					
Director Name SCOTTY NEASBITT			Director Name DANIEL F HARRINGTON		
Street Address 31 OLD COUNTY RD			Street Address 17 ABBEY AVENUE		
City BARRINGTON	State RI	^{Zip} 02806	City WARWICK	State RI	^{Z₁p} 02888
Director Name DAN DAMIANO			Director Name ROBERT SETTIPANE		
Street Address 160 HOLLAND AVENUE			Street Address 7 WHITE AVENUE		
City RIVERSIDE	State RI	Zip 02915	City RIVERSIDE	State RI	Zip 02915
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee					
Name of Officer/Authorized Representative				Date	
CINDY WEINREBE TREASURER				6/9/18	
Signature of Officer/Authorized Representative Constructive Theasure FILED					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos ri.gov FORM 631 - Revised: 11/2017

THE BARRINGTON BAPTIST CHURCH ENTITY ID NUMBER 000027031

ADDITIONAL DIRECTORS KIM NELSON 282 WILSON AVENUE RUMFORD RI 02916

RICHARD SWALLOW 75 PINE STREET REHOBOTH MA 02769

EDWARD CRONAN
15 GREENWICH AVENUE
EAST PROVIDENCE RI 02914

BRYAN PAYNE 66 ALFRED DROWNE ROAD BARRINGTON RI 02806