



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

**Fee: \$20.00**

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

**Non-Profit Corporation  
Annual Report**

*Filing Period: June 1 - June 30*

*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.*

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 000149668

**2. Name of Corporation** The Zachary J. Stiness Memorial Fund, Inc.

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code



813319

**4. Principal Office Address**

No. and Street: 6 ABBY ROAD

City or Town: BARRINGTON

State: RI

Zip: 02806

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

RAISING FUNDS FOR COLLEGE SCHOLARSHIPS AND BUILDING A PUBLIC MEMORIAL GARDEN AT BARRINGTON HIGH SCHOOL IN MEMORY OF ZACHARY J. STINESS

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | KELLEY STINESS                                        | 6449 INDIGO BUNTING PLACE<br>LAKEWOOD RANCH, FL 34202 USA         |
| TREASURER      | JOHN STINESS                                          | 6449 INDIGO BUNTING PLACE<br>LAKEWOOD RANCH, FL 34202 USA         |
| SECRETARY      | ANN STINESS                                           | 6449 INDIGO BUNTING PLACE<br>LAKEWOOD RANCH, FL 34202 USA         |
| VICE PRESIDENT | MATTHEW GOLDEN                                        | 29 COUNTRY SIDE ROAD<br>BELLINGHAM, MA 02019 USA                  |
| DIRECTOR       | JOSHUA STINESS                                        | 6449 INDIGO BUNTING PLACE<br>LAKEWOOD RANCH , FL 34202 USA        |
| DIRECTOR       | KELLEY STINESS                                        | 6449 INDIGO BUNTING PLAC<br>LAKEWOOD RANCH, FL 34202 USA          |
| DIRECTOR       | JOHN STINESS                                          | 6449 INDIGO BUNTING PLACE<br>LAKEWOOD RANCH, FL 34202 USA         |
| DIRECTOR       | MATTHEW GOLDEN                                        | 29 COUNTRYSIDE ROAD<br>BELLINGHAM, MA 02019 USA                   |
| DIRECTOR       | ANN STINESS                                           | 6449 INDIGO BUNTING PLACE<br>LAKEWOOD RANCH, FL 34202 USA         |

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

MICHAEL A. OREPILE 1445 WAMPANOAG TRAIL, SUITE 117 EAST PROVIDENCE , RI 02915

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

**Signed this 12 Day of July, 2021 at 10:29:43 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 § 7-6.**

By KELLEY STINESS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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