



**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. 001696040

2. Name of Corporation BCA Parent Teacher Fund

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



813410

4. Principal Office Address

No. and Street: C/O BARRINGTON CHRISTIAN ACADEMY
9 OLD COUNTY ROAD

City or Town: BARRINGTON

State: RI Zip: 02806 Country: US

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

TO SUPPORT CORE EDUCATION AND ENRICHMENT ACTIVITIES OF STUDENTS AT
BCA AND IN THE BROADER BARRINGTON COMMUNITY, AND TO INCREASE ACCESS
TO A BCA EDUCATION THROUGH SCHOLARSHIPS.

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.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL SKAZINSKI	126 HILLARD AVE WARWICK, RI 02886 USA
TREASURER	MICHELLE WEBER	273 MAPLE AVE BARRINGTON, RI 02806 USA
DIRECTOR	RACHEL MCGUIRE	26 SAN MIGUEL DR BRISTOL, RI 02809 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

MICHELLE WEBER 9 OLD COUNTY ROAD BARRINGTON , RI 02806

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 11:32:44 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 MICHELLE WEBER
Signature of Authorized Person

Form No. 631
Revised 09/07