



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

MAR 07 2023

BY

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1. Entity ID Number 795380		2. Exact name of the Corporation BARRINGTON PLUMBING AND HEATING, INC.			
3. Principal Office Address 3 Fairview Circle		City Barrington		State RI	Zip 02806
4. NAICS Code 238220		6. Brief description of the character of business conducted in Rhode Island To provide plumbing and heating services and all other lawful business			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name James A. Kazounis			Vice-President Name James A. Kazounis		
Street Address 3 Fairview Circle			Street Address 3 Fairview Circle		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
Secretary Name James A. Kazounis			Treasurer Name James A. Kazounis		
Street Address 3 Fairview Circle			Street Address 3 Fairview Circle		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name James A. Kazounis			Director Name Jonathan A. Scungio		
Street Address 3 Fairview Circle			Street Address 74 Argyle Street		
City Barrington	State RI	Zip 02806	City Cranston	State RI	Zip 02806
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>					
This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. 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.					
Name of Authorized Representative James A. Kazounis					Date 2/22/23
Signature of Authorized Representative					

MAIL TO:

Division of Business Services

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