



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.

 RECEIVED
 R.I. DEPT. OF STATE
 4/10/2023

1. Entity ID Number 544600		2. Exact name of the Corporation Barrington Consultants, Inc.		2023 APR - 7 A 11:44										
3. Principal Office Address 18 Maple Avenue, #122			City Barrington	State RI	Zip 02806									
4. NAICS Code 544613		6. Brief description of the character of business conducted in Rhode Island To provide information technology consulting services.												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses)														
President Name Robert A. Carlson			Vice-President Name											
Street Address 418 Poppasquash Road			Street Address											
City Bristol	State RI	Zip 02809	City	State	Zip									
Secretary Name Robert A. Carlson			Treasurer Name Robert A. Carlson											
Street Address 418 Poppasquash Road			Street Address 418 Poppasquash Road											
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Robert A. Carlson			Director Name											
Street Address 418 Poppasquash Road			Street Address											
City Bristol	State RI	Zip 02809	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized			10. Shares Issued 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.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>\$0.01 par value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	\$0.01 par value			
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
100	Common	\$0.01 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 Robert A. Carlson, President				Date March 31, 2023										
Signature of Authorized Representative														

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

 APR 07 2023
 BY ML 1028

FORM 630 - Revised: 2/2023