

FILED



**State of Rhode Island
Department of State - Business Services Division**

**Annual Report for the year: 2023
Non-Profit Corporation**

MAY 11 2023
B: 212
09

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000131979		2. Exact name of the Corporation BRIGGS FARMS IMPROVEMENT ASSOCIATION, INC.			
3. State of Incorporation RHODE ISLAND		5. Brief description of the character of business conducted in Rhode Island TO PROTECT AND PROMOTE THE BEST INTERESTS OF THE RESIDENTS OF BRIGGS FARMS ESTATES			
4. NAICS Code 813910					
6. Principal Office Address 30 HOLLYWOOD AVENUE			City NARRAGANSETT	State RI	Zip 02882
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name CHRISTINA DICOMES			Vice-President Name DIANE MAUL		
Street Address 130 DAYTONA AVENUE			Street Address 94 DAYTONA AVENUE		
City NARRAGANSETT	State RI	Zip 02882	City NARRAGANSETT	State RI	Zip 02882
Secretary Name JEAN NARDONE			Treasurer Name JOSEPH F. CLARK		
Street Address 31 HOLLYWOOD AVENUE			Street Address 30 HOLLYWOOD AVENUE		
City NARRAGANSETT	State RI	Zip 02882	City NARRAGANSETT	State RI	Zip 02882
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name DEBORAH RYAN			Director Name DAVID SPINELLA		
Street Address 21 DAYTONA AVENUE			Street Address 32 LAKEWORTH AVENUE		
City NARRAGANSETT	State RI	Zip 02882	City NARRAGANSETT	State RI	Zip 02882
Director Name STEVEN NARDONE			Director Name ROBERT PERETTI		
Street Address 31 HOLLYWOOD AVENUE			Street Address 9 HOLLYWOOD AVENUE		
City NARRAGANETT	State RI	Zip 02882	City NARRAGANSETT	State RI	Zip 02882
9. The Registered Agent information of record with the RI Department of State is accurate. 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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative JOSEPH CLARK 26 HOLLYWOOD AVENUE NARRAGANSETT RI				Date 8 MAY 2023	
Signature of Officer/Authorized Representative <i>Joseph F. Clark</i>					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

IO
ADDITIONAL DIRECTOR

131579

PHILLIP AUDETTE

44 DAYTONA AVENUE

NARRAGANSETT RI 02882

FILED

MAY 11 2023

BY

