	State of R Office of the S	hode Island ecretary of		Fee: \$20.00	
Division Of Business Services					
148 W. River Street					
1426		RI 02904-261	.5		
1030		222-3040			
Non-Profit Corporat	ion				
Annual Report Filing Period: February	1 - May 1				
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 - ENTER THE CURRENT YEAR 2024: 2024					
1. Corporate ID No. 000027079					
2. Name of Corporation BARRINGTON PUBLIC LIBRARY FOUNDATION					
3. State of Incorporat	ion				
State: <u>RI</u>					
NAICS CODE					
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 <u>click here.</u>					
NAICS Code					
<u>624190</u>					
4. Principal Office Address					
No. and Street: 2	81 COUNTY ROAD				
	ARRINGTON	State: <u>RI</u>	Zip: <u>02806</u>	Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island					
SUPPORT OF A PUBLIC LIBRARY					
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 Nam			dress	
<u> </u>	First, Middle, Last, Suf	fix Ad	dress, City or Town,	, State, Zip Code, Country	

PRESIDENT	VINCENT WICKER	31 BROADVIEW DRIVE
		BARRINGTON, RI 02806 USA
TREASURER	CHRIS WATSON	11 FIRESIDE DRIVE
		BARRINGTON, RI 02806 USA
DIRECTOR	FRANCES RASMUSSEN	4 SHADY LANE
		BARRINGTON, RI 02806 USA
DIRECTOR	ESME DEVAULT	35 SPRING AVENUE
		BARRINGTON, RI 02806 USA
DIRECTOR	LAURA LAURENCE	33 ANTHONY ROAD
		BARRINGTON, RI 02806 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

KRISTEN CHIN 281 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 25 Day of January, 2024 at 2:50:53 PM 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 CATHERINE LISKA

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved