RI SOS Filing Number: 202447519840 Date: 2/29/2024 10:40:00 AM



## 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: 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. 000041172
- 2. Name of Corporation Barrington Christian Academy
- 3. State of Incorporation

State: RI

## **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>611110</u>

4. Principal Office Address

No. and Street: 9 OLD COUNTY ROAD

City or Town: BARRINGTON State: RI Zip: 02806 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

BARRINGTON CHRISTIAN ACADEMY IS AN ACCREDITED K-12 CHRISTIAN DAY SCHOOL.

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	Address

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID ROBSON	336 SEA VIEW AVE RIVERSIDE, RI 02915 USA
TREASURER	JONAS WILLIAMS	5 STEBER WAY REHOBOTH, MA 02769 USA
CEO	MICHAEL SKAZINSKI	126 HILLARD AVE WARWICK, RI 02886 USA
CFO	MICHELLE WEBER	273 MAPLE AVE BARRINGTON, RI 02806 USA
DIRECTOR	DEREK WILSON	89 ANDREW CT SWANSEA, MA 02777 USA
DIRECTOR	DANIEL HOWE	19 SERPENTINE RD WARREN, RI 02885 USA
DIRECTOR	SARA HARDING	22 CIRCLE DR RIVERSIDE, RI 02915 USA
DIRECTOR	ROBERTO LOPEZ	9 HAWKINS BLVD NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	COREEN MOOK	11 NISBET ST PROVIDENCE, RI 02906 USA
DIRECTOR	AARON FISHER	107 PECK ST REHOBOTH, MA 02769 USA
DIRECTOR	ROB SETTIPANE	7 WHITE AVENUE RIVERSIDE, RI 02915 USA
DIRECTOR	DERYL ROBSON	336 SEA VIEW AVENUE RIVERSIDE, RI 02915 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

DAVID ROBSON 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 29 Day of February, 2024 at 10:41:41 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

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