RI SOS Filing Number: 202454981160 Date: 5/29/2024 1:01:00 PM



# 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. 001704707
- 2. Name of Corporation Barrington Parents of Note
- 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>624190</u>

#### 4. Principal Office Address

No. and Street: 4 TIFFANY CIRCLE

City or Town: <u>BARRINGTON</u> 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

DEDICATED TO PROMOTING MUSIC EDUCATION AT BARRINGTON HIGH SCHOOL. EXCLUSIVELY FOR CHARITABLE PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3)OF THE INTERNAL REVENUE CODE OF 1986

### 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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	AARON AGUIAR	4 TIFFANY CIRCLE BARRINGTON, RI 02806 USA
TREASURER	KRISTIE PUSTER	21 CARPENTER AVE. BARRINGTON, RI 02806 USA
SECRETARY	JAMIE BURKE	219 PROMENADE STREET BARRINGTON, RI 02806 USA
SECRETARY	STEPHEN BUKA	43 MEADOWBROOK DR. BARRINGTON, RI 02806 USA
DIRECTOR	AARON AGUIAR	4 TIFFANY CIRCLE BARRINGTON, RI 02806 USA
DIRECTOR	MEREDYTH SANDERSON	32 PRIMROSE HILL ROAD BARRINGTON, RI 02806 USA
DIRECTOR	JAMIE BURKE	219 PROMENADE STREET BARRINGTON, RI 02806 USA
VICE PRESIDENT	MEREDYTH SANDERSON	32 PRIMROSE HILL RD. BARRINGTON, RI 02806 US
DIRECTOR	KRISTIE PUSTER	21 CARPENTER AVE. BARRINGTON, RI 02806 USA
DIRECTOR	STEPHEN BUKA	43 MEADOWBROOK DR. BARRINGTON, RI 02806 USA
DIRECTOR	ASHLEY PRICKEL-KANE	52 SYLVAN RD. RUMFORD, RI 02916 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

JEFFREY S. BRENNER, ESQ. NIXON PEABODY LLP ONE CITIZENS PLAZA, SUITE 500 PROVIDENCE, RI 02903

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 May, 2024 at 1:03:03 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 KRISTIE PUSTER

Signature of Authorized Person

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