RI SOS Filing State of Rhode Island	g Number: 202	328756430	Date: 2/16/2023 4:00:	Date: 2/16/2023 4:00:00 PM		
Department of State - Business Services Division						
annual Report for the year: 7073						
on-Profit Corporation	on-Profit Corporation			FEB 1 6 2023		
→ Filing period: February 1 - May 1 → Filing Fee: \$20.00			27/0			
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.						
1. Entity ID Number 000082589	2. Exact name of Bristo	the Corporation Warrer	Education As	ion Association		
3. State of Incorporation	5. Brief description		r of business conducted in Rhod			
K+	_	1 1/2 10 22 2 1 4				
4. NAICS Code	Labor Organization					
8 12930 6. Principal Office Address	***	**		<u>,</u>		
17 Patricia Ann Drive		Bristol	State	12809		
7. List ALL officers (names and addresses) Check the box to indicate an attachment						
President Name Ile A.W. Da Silva			1.2 2	Vice-President Name Chidester		
Street Address Drive Drive	Street Address			Street		
city Bristol		zip 2809	city Warren	State I	Zip 02885	
Becretary Name Achilli			Treasure Name US J.			
Street Address Bullocks 1	25 Bullocks Point Ave Apt SB			Street Address Patricia Ann Drive		
city RIVErside	State RI	Zip 02915	city Bristol	State	zip02-809	
3. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment						
Director Name Ple A.W. D	Da Silva		Director:Name 1	DirectorName Stringer		
Street Address Drive			Street Address Osaland Court			
cityBastol	State I	Zip 02809	city RIVerside	State T	zip 2915	
Director, Name ISCLAN Childrester			Director Name			
Street Address Main Street			Street Address			
Dis Warren	StateRI	zig 2885	City	State	Zip	
9. The Registered Agent information						
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.						
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.						
Name of Officer/Authorized Repre		ō Jr.		Date 2/13/	23	
signature of Officer/Authorized Representative						

MAIL TO:

Division of Business Services

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

Attachment to Annual Report 2023

000082589 - Bristol Warren Education Association

Co-President

Sarah Stringer 6 Rosaland Ct Riverside, RI 02915