



State of Rhode Island and Providence Plantations  
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: June 1 - June 30

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:** 2012

**1. Corporate ID No.** 000691861

**2. Name of Corporation** LIBERTALIA AUTONOMOUS SPACE INC.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 280 BROADWAY RM 200

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO EDUCATE THE PUBLIC ABOUT THE HISTORY OF PROGRESSIVE SOCIAL  
MOVEMENTS IN THE UNITED STATES AND THE REST OF THE WORLD THROUGH  
DIFFERENT MEDIA

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	ERIN KATHERINE KAHLE	234 WAYLAND AVE #3 PROVIDENCE, RI 02906 USA
DIRECTOR	CHRIS GANG	311 AMHERST ST APT. 2 PROVIDENCE, RI 02909 USA
DIRECTOR	KRISTINA BROWN	11 GIBBON CT PROVIDENCE, RI 02909 USA
DIRECTOR	SARAH DAEGLING	36 HUDSON ST. APT 1 PROVIDENCE, RI 02909 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

KRISTINA L. BROWN 280 BROADWAY, ROOM 200 PROVIDENCE , RI 02903

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.**

**Signed this 11 Day of July, 2012 at 4:21:34 PM.** *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 corporation, 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 ERIN KATHERINE KAHLE  
Signature of Officer of the Corporation

President or  Vice President or  Secretary or  Assistant Secretary or

Treasurer or  Receiver or  Trustee (check one)

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.**

Form No. 631  
Revised 09/07

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