



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: 2016

1. Corporate ID No. 000542987

2. Name of Corporation Living on the Edge

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 15 ELTON STREET

City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

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

TO PROMOTE KNOWLEDGE OF CLIMATE CHANGE, SEA LEVEL RISE AND STORM DAMAGE ON THE HUMAN AND NATURAL LANDSCAPE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
PRESIDENT	KATHIE FLORSHEIM	15 ELTON STREET PROVIDENCE, RI 02906 USA
DIRECTOR	CONSTANCE MUSSELLS	7 NICHOLS LANE EAST GREENWICH, RI 02818 USA

DIRECTOR	KATHLEEN HANCOCK	5 MILK STREET BRISTOL, RI 02809 USA
DIRECTOR	KATHIE FLORSHEIM	15 ELTON STREET PROVIDENCE, RI 02906 USA
DIRECTOR	JON BOOTHROYD	346 MIDDLEBRIDGE ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	SANDRA MILLER	62 HERBERT ROAD ARLINGTON, MA 02472 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**

KATHIE FLORSHEIM 15 ELTON STREET PROVIDENCE , RI 02906

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

Signed this 17 Day of June, 2016 at 2:10:51 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 LINDA PETERSON
Signature of Authorized Person

Form No. 631
Revised 09/07