RI SOS Filing Number: 201868983580 Date: 6/8/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual	Report	for the	year:
Non-Pro	ofit Con	noratio	n -

2018

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

2018 JUN -8 PM 3: 45

Non-Profit Corporation ——

- → Filing period. June 1 June 30
- → Filing Fee: \$20.00
- → Penalty: Additional \$25.00 fee if form is not filed by July 30

1. Entity ID Number 000542987	2. Exact name of the Corporation Living on the Edge						
3. State of Incorporation	5. Brief descrip	ption of the charac	ter of business conducted in Rho	de Island			
Rhode Island		To promote knowledge of climate change, sea level rise and storm damage on the human and natural landscape.					
4. NAICS Code		oupo.					
813312 - Environment, Conserv							
6 Principal Office Address			City	State	Zip		
15 Elton St	ı St			RI	02906		
7. List ALL officers (names and ad	dresses)			Check the box to indic	cate an attachment		
President Name Kathie Florsheim			Vice-President Name				
Street Address 15 Elton Street			Street Address				
City Providence	State RI	Zip 02906	City	State	Zip		
Secretary Name Janet Freedman			Treasurer Name Constance Mussells				
Street Address 41-C Oak Street			Street Address 7 Nichols Ln				
City Providence	State RI	Zip 02909	City East Greenwich	State RI	Zip 02818		
8. List ALL directors (names and a	ddresses). RI Co	orporations MUST	list at least THREE directors.	Check the box to indu	cate an attachment		
Director Name Kathie Florsheim			Director Name Constance Mussells				
Street Address 15 Elton Street			Street Address 7 Nichols Ln				
City Providence	State RI	^{Zip} 02906	City East Greenwich	State RI	Z _{IP} 02818		
Director Name Janet Freedman			Director Name Christopher Little				
Street Address 41-C Oak Street			Street Address 125 Fresh Meadow Rd				
City Providence	State RI	Zip 02909	City Wakefield	State RI	Zip 02879		
9. Registered Agent in Rhode Islan	nd. This informatio	on is currently of reco	ord in the Department of State. Chang	es require filing Form 6	41.		
Under penalty of perjury, I decla statements, and that all stateme				companying sched	ules and		
This report must be signed by either the Pre	sident, Vice-Presider	nt, Secretary, Assistant	Secretary, Treasurer, duly Authorized Repr	esentative, Receiver or Tru	stee		
Name of Officer/Authorized Repre Kathie Florsheim	Date 6/8/2018						
Signature of Officer/Authorized Re	presentative		FILED	1 -/ -/ -			
Hother Worth	₽	9 GN 000	COMPANY HERB				
			JUN 0 8 2016;	<u> </u>			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov W 33030A

FORM 631 - Revised: 11/2017

#8) Continuation of list of Directors for Living on the Edge

- Kathleen Hancock 14 Washington Street / Apt 1 Warren, RI 02885
- Sandra Miller 62 Hebert Rd Arlington, MA 02472