RI SOS Filing Number: 202445212400 Date: 2/1/2024 12:29:00 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. 000160108
- 2. Name of Corporation The Rhode Island Flood Mitigation Association.
- 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>813920</u>

#### 4. Principal Office Address

No. and Street: <u>145 TAUNTON AVE</u>

**ROOM 309** 

City or Town: <u>EAST PROVIDENCE</u> State: <u>RI</u> Zip: <u>02914</u> Country: <u>USA</u>

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

TO UNITE IN COMMON ORGANIZATION THOSE PROFESSIONALLY ENGAGED IN FLOODPLAIN MANAGEMENT. TO PROMOTE PUBLIC AWARENESS OF PROPER FLOOD MITIGATION PRACTICES.

#### 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	LEAH FELDMAN	4808 TOWER HILL RD WAKEFIELD, RI 02879 USA
SECRETARY	TONI-MARIA PIGNATELLI	10 DUNNELL AVE PAWTUCKET, RI 02860 USA
VICE PRESIDENT	LANCE HILL	8 BLACKSTONE VALLEY PL LINCOLN, RI 02865 USA
DIRECTOR	EMILY MORSE	250 ARMISTICE BOULEVARD PAWTUCKET, RI 02860 USA
DIRECTOR	CHUCK LOWE	450 VETERANS MEMORIAL PARKWAY EAST PROVIDENCE, RI 02914 USA
DIRECTOR	MEGAN ELWELL	188 VALLEY ST #300 PROVIDENCE, RI 02909 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

WAYNE BARNES 145 TAUNTON AVENUE, ROOM 309 EAST PROVIDENCE, RI 02914

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

**Signed this 1 Day of February, 2024 at 12:30:27 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 **EMILY MORSE**

Signature of Authorized Person

Form No. 631 Revised 09/07

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