## 2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005101

Entity Name: WORKERS COMPENSATION RESEARCH INSTITUTE

INCORPORATED

**Current Principal Place of Business:** 

955 MASSACHUSETTS AVE.

**6TH FLOOR** 

CAMBRIDGE, MA 02139

**Current Mailing Address:** 

955 MASSACHUSETTS AVE.

**6TH FLOOR** 

CAMBRIDGE, MA 02139

FEI Number: 36-3264285 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC. 539 FIFTH AVENUE SOUTH SUITE 330

NAPLES, FL 34102 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Jan 10, 2024

Secretary of State

7683338765CC

Officer/Director Detail:

 Title
 DIRECTOR
 Title
 PRESIDENT AND CEO

 Name
 PERROOTS, STEVE
 Name
 TANABE, RAMONA P

Address MARRIOTT Address 955 MASSACHUSETTS AVENUE

10400 FERNWOOD RD

City-State-Zip: CAMBRIDGE MA 02139

Title DIRECTOR

Name PASS, RUSSELL J SEORGE, KIMBERLY

Address GALLAGHER BASSETT Address SEDGWICK 1100 RIDGEWAY LOOP ROAD

2850 GOLF ROAD

City-State-Zip: MEMPHIS TN 38120

Title DIRECTOR

Name VINCENZ, JOAN Name BENNETT, STEVE

Address UNITED AIRLINES Address 8700 WEST BRYN MAWR, SUITE 1200S

233 S WACKER City-State-Zip: CHICAGO IL 60631

City-State-Zip: CHICAGO IL 60603

Title DIRECTOR

Name KANE, DEBRA

Address 157 BERKELEY ST

Address 801 WARRENVILLE RD 700 City-State-Zip: BOSTON MA 02116

City-State-Zip: LISLE IL 60532

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAMONA TANABE PRESIDENT AND CEO 01/10/2024

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VC

Name ADAMS, MICHELE

Address WALMART

702 SOUTHWEST 8TH STREET

City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR

Name ALGIRE, DENISE ZOE

Address 5918 STONERIDGE MALL RD.

City-State-Zip: PLEASANTON CA 94588

Title DIRECTOR
Name BRADY, KEVIN

Address 380 SENTRY PARKWAY

City-State-Zip: BLUE BELL PA 19422-2328

Title DIRECTOR

Name IVES, RICHARD

Address ONE TOWER SQ

7MS

City-State-Zip: HARTFORD CT 06183

Title DIRECTOR

Name KEARNEY, PAUL
Address 200 N. GRAND AVE
City-State-Zip: LANSING MI 48901

Title DIRECTOR

Name ZAPARANICK, MELISSA
Address 1 HARTFORD PLAZA
City-State-Zip: HARTFORD CT 06155

Title CHAIRMAN

Name WELLS, JOSEPH
Address 100 EVEREST WAY

City-State-Zip: WARREN NJ 07059

Title TREASURER
Name STEWART, JON

Address 250 WEST MAIN STREET

SUITE 900

City-State-Zip: LEXINGTON KY 40507

Title DIRECTOR

Name HAVEN, DIANA

Address 505 BROADWAY

CARDINAL HALL 6TH

City-State-Zip: REDWOOD CITY CA 94063

Title DIRECTOR

Name DEBLOCK, NEIL

Address 1299 ZURICH WAY

City-State-Zip: SCHAUMBURG IL 60196

Title DIRECTOR

Name FEUERLICHT, IRA

Address 28 LIBERTY ST.

City-State-Zip: NEW YORK NY 10005