

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005101

FILED
Jul 14, 2006
Secretary of State

Entity Name: WORKERS COMPENSATION RESEARCH INSTITUTE INCORPORATED

Current Principal Place of Business:

955 MASSACHUSETTS AVE.
CAMBRIDGE, MA 02139

New Principal Place of Business:

Current Mailing Address:

955 MASSACHUSETTS AVE.
CAMBRIDGE, MA 02139

New Mailing Address:

FEI Number: 36-3264285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS INC.
773 4TH AVE. NORTH
SUITE E
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CV () Delete
Name: ARMENTANO, VINCENT
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: V () Delete
Name: WALTON, RONALD JR.
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: V () Delete
Name: RHEEL, ROBERT
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: T () Delete
Name: HOGLE, MARK
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: D () Delete
Name: DOBLEMAN, CRISTINA
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: V (X) Delete
Name: HEIDRICH, GREGORY
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CH (X) Change () Addition
Name: STEGGERT, ROBERT B
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: MCPARTLAND, PETER
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: T (X) Change () Addition
Name: LANGNER, KATHLEEN
Address: 955 MASSACHUSETTS AVE.
City-St-Zip: CAMBRIDGE, MA 02139

Title: S (X) Change () Addition
Name: TANABE, RAMONA P
Address: 955 MASSACHUSETTS AVENUE
City-St-Zip: CAMBRIDGE, MA 02139 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMONA TANABE

S

07/14/2006

Electronic Signature of Signing Officer or Director

Date