

**2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004517

**Entity Name:** BLUE CROSS & BLUE SHIELD OF RHODE ISLAND, CORP.**Current Principal Place of Business:**500 EXCHANGE STREET  
PROVIDENCE, RI 02903**Current Mailing Address:**500 EXCHANGE STREET  
PROVIDENCE, RI 02903**FEI Number:** 05-0158952**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** ROSE SONG, ASSISTANT SECRETARY ON BEHALF OF CT CORP SYSTEM 04/27/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name LEDERBERG, MICHELE B  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name BARGE, DENISE  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name HARRINGTON, JAMES  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name LICHT, WARREN DR.  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name BUSH, CHRISTOPHER  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name DUHAMEL, SCOTT  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name LANGE, ELIZABETH DR.  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name NORTON, ROBERT  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

**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:** MICHELE LEDERBERG**CHIEF ADMINISTRATION 04/27/2018**  
**OFFICER**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SHERMAN, MERRILL  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title CEO  
Name KECK, KIM  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name RODRIGUEZ, BOBBY  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title CFO  
Name STEWART, MARK  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name DUNCAN, JEREMY  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name COSTA, DEREK  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name CUMMINGS, MELISSA  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name MCCARTY, COREY  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name PITNEY, CHRISTINA  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name SLADE, SAMUEL  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR

Title CHAIRMAN  
Name WYROFSKY, RANDY  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name NERONHA, MONICA ESQ.  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name MANOCCHIA, AUGUSTINE DR.  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name LANGENUS, JOHN  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name SPLAINE, KEVIN  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name COLLINS, MATTHEW  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name DEMOURA, TARA  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name MARRONE, MICHAEL  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name RINGO, KURT  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name WINFREY, LINDA  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name DICHIRO, MICHAEL  
Address 500 EXCHANGE STREET

Name HUNTLEY-NEWBY, DONNA  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title VC  
Name QUATTROMANI, PETER  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name CROSBY, CHRISTOPHER  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name SANDERS, ROBERT  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name DENICE, NICHOLAS  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

City-State-Zip: PROVIDENCE RI 02903

Title VP  
Name DALLOW, KATHERINE  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name ISRAELITE, MICHAEL  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name PAUL, DEBRA  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name COHAN, STEPHEN  
Address 500 EXCHANGE STREET  
City-State-Zip: PROVIDENCE RI 02903