## 2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002635

Entity Name: MAINE EMPLOYERS' MUTUAL INSURANCE COMPANY

**FILED** Apr 23, 2025 Secretary of State 0443860882CC

**Current Principal Place of Business:** 

261 COMMERCIAL STREET PORTLAND. ME 04101

# **Current Mailing Address:**

261 COMMERCIAL STREET PORTLAND, ME 04101 US

FEI Number: 01-0476508 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST. TALLAHASSEE, FL 32399 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

#### Officer/Director Detail :

Title	DIRECTOR	Title	DIRECTOR

RAPKIN, HILARY ANN **BOULOS, GREGORY WILLIAM** Name Name 261 COMMERCIAL STREET Address Address 261 COMMERCIAL STREET PORTLAND ME 04101 PORTLAND ME 04101 City-State-Zip: City-State-Zip:

Title DIRECTOR, PRESIDENT, CEO Title DIRECTOR Name BOURQUE, MICHAEL PETER BURGESS, MEREDITH NANCY Name

STRANG Address

261 COMMERCIAL STREET Address 261 COMMERCIAL STREET PORTLAND ME 04101 City-State-Zip:

PORTLAND ME 04101 City-State-Zip:

Title PRESIDENT, NORTHEAST REGION Title SENIOR VICE PRESIDENT, CFO.

Name

TREASURER

Address 261 COMMERCIAL STREET FONGEMIE, EILEEN Name City-State-Zip: PORTLAND ME 04101 Address 261 COMMERCIAL STREET

City-State-Zip: PORTLAND ME 04101

Title SENIOR VICE-PRESIDENT, CLAIMS Name HARMON, MATTHEW HOWARD Title ASST. SECRETARY 261 COMMERCIAL STREET Address HOWARD, CHRISTOPHER Name

City-State-Zip: PORTLAND ME 04101 Address 261 COMMERCIAL STREET

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EILEEN FONGEMIE

SENIOR VICE PRESIDENT, CFO. **TREASURER** 

FUNK, JEFFREY DAVID

04/23/2025

## Officer/Director Detail Continued:

Title DIRECTOR

Name BOULOS, GREGORY WILLIAM

Address 261 COMMERCIAL STREET

City-State-Zip: PORTLAND ME 04101

Title DIRECTOR

Name HULIT, JEANNE ANDERSON Address 261 COMMERCIAL STREET

City-State-Zip: PORTLAND ME 04101

Title DIRECTOR

Name LACHANCE, LAURIE GAGNON
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title SENIOR VP, CHIEF HR OFFICER

Name ALLEN, MICHELLE

Address 261 COMMERCIAL STREET

City-State-Zip: PORTLAND ME 04101

Title DIRECTOR

Name DENEKAS, CRAIG NORMAN
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title PRESIDENT / CEO, DIRECTOR
Name BOURQUE, MICHAEL PETER
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title DIRECTOR

Name WILSON, JEAN PATRICIA Address 261 COMMERCIAL STREET

City-State-Zip: PORTLAND ME 04101

Title SR VICE PRES & CHIEF INFORMATION OFFICER

Name YAO, JOHN ROBERT

Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title DIRECTOR

Name RAYE, KEVIN LEROY

Address 261 COMMERCIAL STREET

City-State-Zip: PORTLAND ME 04101

Title SENIOR VICE-PRESIDENT,

**UNDERWRITING OPERATIONS** 

Name JAMISON, GREGORY GRANT
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101