

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002635

Entity Name: MAINE EMPLOYERS' MUTUAL INSURANCE COMPANY**Current Principal Place of Business:**261 COMMERCIAL STREET
PORTLAND, ME 04101**Current Mailing Address:**PO BOX 11409
PORTLAND, ME 04104 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
Name RAPKIN, HILARY ANN
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 DIRECTOR
Name BOULOS, GREGORY WILLIAM
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title DIRECTOR
Name BURGESS, MEREDITH NANCY
STRANG
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

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

Title SVP - EXTERNAL AFFAIRS,
SECRETARY
Name PAYNE, ANTHONY MORRIS
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title SENIOR VICE PRESIDENT, CFO,
TREASURER
Name FONGEMIE, EILEEN
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title PRESIDENT, NORTHEAST REGION
Name FUNK, JEFFREY DAVID
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

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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 FONGEMIESENIOR VICE
PRESIDENT, CFO,
TREASURER

04/19/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name HOWARD, CHRISTOPHER
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

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

Title DIRECTOR
Name SMITH, LANCE AVERY
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 SENIOR VICE-PRESIDENT, CLAIMS
Name HARMON, MATTHEW HOWARD
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title SENIOR VICE-PRESIDENT, LOSS
CONTROL
Name VAN SIEGFRIED, KARL
Address 261 COMMERCIAL STREET
City-State-Zip: PORTLAND ME 04101

Title SENIOR VP, CHIEF ADMINISTRATIVE
OFFICER
Name LAMSON, CATHERINE FLAHERTY
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