# Electronic Signature of Signing Officer/Director Detail

# 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 R	egistered Agent
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#### **Officer/Director Detail :**

Onicendire			
Title	DIRECTOR	Title	DIRECTOR
Name	RAPKIN, HILARY ANN	Name	DENEKAS, CRAIG NORMAN
Address	261 COMMERCIAL STREET	Address	261 COMMERCIAL STREET
City-State-Zip:	PORTLAND ME 04101	City-State-Zip:	PORTLAND ME 04101
Title	DIRECTOR	Title	DIRECTOR
Name	BOULOS, GREGORY WILLIAM	Name	BURGESS, MEREDITH NANCY STRANG
Address	261 COMMERCIAL STREET	Address	261 COMMERCIAL STREET
City-State-Zip:	PORTLAND ME 04101	City-State-Zip:	PORTLAND ME 04101
Title Name	DIRECTOR BOURQUE, MICHAEL PETER	Title	SVP - EXTERNAL AFFAIRS, SECRETARY
Address	261 COMMERCIAL STREET	Name	PAYNE, ANTHONY MORRIS
City-State-Zip:	PORTLAND ME 04101	Address	261 COMMERCIAL STREET
Title	SENIOR VICE PRESIDENT, CFO,	City-State-Zip:	PORTLAND ME 04101
	TREASURER	Title	PRESIDENT, NORTHEAST REGION
Name	FONGEMIE, EILEEN	Name	FUNK, JEFFREY DAVID
Address	261 COMMERCIAL STREET	Address	261 COMMERCIAL STREET
City-State-Zip:	PORTLAND ME 04101	City-State-Zip:	PORTLAND ME 04101

## 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 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

04/19/2023

Date

Date

Apr 19, 2023 Secretary of State 7135633283CC

FILED

Certificate of Status Desired: No

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F1000002635

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

# Name and Address of Current Registered Agent:

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

#### **Officer/Director Detail Continued :**

Title	ASST. SECRETARY	Title	SENIOR VICE-PRESIDENT, CLAIMS
Name	HOWARD, CHRISTOPHER	Name	HARMON, MATTHEW HOWARD
Address	261 COMMERCIAL STREET	Address	261 COMMERCIAL STREET
City-State-Zip:	PORTLAND ME 04101	City-State-Zip:	PORTLAND ME 04101
Title	SENIOR VICE-PRESIDENT, UNDERWRITING OPERATIONS	Title	SENIOR VICE-PRESIDENT, LOSS CONTROL
Name	JAMISON, GREGORY GRANT	Name	VAN SIEGFRIED, KARL
Address	261 COMMERCIAL STREET	Address	261 COMMERCIAL STREET
City-State-Zip:	PORTLAND ME 04101	City-State-Zip:	PORTLAND ME 04101
Title	PRESIDENT / CEO	Title	SENIOR VP, CHIEF ADMINISTRATIVE OFFICER
Name	BOURQUE, MICHAEL PETER	Name	LAMSON, CATHERINE FLAHERTY
Address	261 COMMERCIAL STREET	Address	261 COMMERCIAL STREET
City-State-Zip:	PORTLAND ME 04101	City-State-Zip:	PORTLAND ME 04101
Title Name Address City-State-Zip:	DIRECTOR SMITH, LANCE AVERY 261 COMMERCIAL STREET PORTLAND ME 04101	Title Name Address City-State-Zip:	DIRECTOR HULIT, JEANNE ANDERSON 261 COMMERCIAL STREET PORTLAND ME 04101
Title	DIRECTOR	Title	DIRECTOR
Name	WILSON, JEAN PATRICIA	Name	LACHANCE, LAURIE GAGNON
Address	261 COMMERCIAL STREET	Address	261 COMMERCIAL STREET
City-State-Zip:	PORTLAND ME 04101	City-State-Zip:	PORTLAND ME 04101
Title Name	SR VICE PRES & CHIEF INFORMATION OFFICER YAO, JOHN ROBERT		

Address 261 COMMERCIAL STREET

City-State-Zip: PORTLAND ME 04101