



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3011

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 88111		2. Name of Corporation WORKERS' COMPENSATION ASSOCIATION OF RHODE ISLAND EMPLOYERS			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address PO BOX 9185		City PROVIDENCE	Zip 02940
5. Foreign corporation. Enter principal office address				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO PROMOTE AND PERPETUATE THE PRACTICE OF SOUND AND CONSERVATIVE SELF-INSURERS FOR WORKERS COMPENSATION					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name STEVE SWEET			Vice President Name		
Street Address 195 FRANCES AVENUE			Street Address		
City CRANSTON	State RI	Zip 02910	City	State	Zip
Secretary Name JENNIFER CONRAD			Treasurer Name LINDA DUROCHER		
Street Address 167 Point Street			Street Address One Beacon Centre		
City Providence	State RI	Zip 02903	City Warwick	State RI	Zip 02886
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Di Barber			Director Name Laurie Dufour		
Street Address 165 Dillabar Avenue			Street Address 88 Boyd Avenue		
City North Kingstown, RI	State RI	Zip 02852	City East Providence	State RI	Zip 02914
Director Name Frank Parella			Director Name		
Street Address 116 Sunrise Drive			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name Charles A. Hambly, Jr.			Address		
Address 123 Dyer Street			City Providence	Zip 02903	

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date	FILED
Check No.	JUN 24 2008
By	By 793
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

Linda Durocher

Print or Type Name of Officer

Treasurer

Title of Officer