

A. Ralph Mollis, Secretary of Sta Corporations Division 148 W. River Stre Providence, RI 02904-261

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2011 401.222,30-

Fil ing Period: June 1 - June 30 -	 Filing Fee: \$20.00* 	· THIS REPORT MUST I	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 re	port within the time prescribed	l by law (R.I.G.L. 7-6-91) is subject to a

RI 86 Weybosset Street 5. Foreign corporation. Enter principal office address City State 2. State 2. State 2. State 2. Brief Description of the character of the affairs which are actually conducted in Rhode Island To create a cooperative risk management program pursant to R.I.G.L. Section 45-5-20.1 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)	Zip 02903			
3. State of Incorporation 4. Corporate address in Rhode Island - Street Address Providence 86 Weybosset Street Providence 5. Foreign corporation. Enter principal office address City State 2 5. Brief Description of the character of the affairs which are actually conducted in Rhode Island To create a cooperative risk management program pursant to R.I.G.L. Section 45-5-20.1 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT Fill In Spaces Before Using ATTACHMENT Street Address Street Address 100 Old River Road, PO Box 100 1385 Hartford Avenue City State Zip City State Zip Zip	-			
RI 86 Weybosset Street 5. Foreign corporation. Enter principal office address City State 2. Bruef Description of the character of the affairs which are actually conducted in Rhode Island To create a cooperative risk management program pursant to R.I.G.L. Section 45-5-20.1 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT Joseph Chiodo President Name John F. Ward Street Address 100 Old River Road, PO Box 100 City Mate Zip City State Zip Johnston RI Secretary Name	-			
5. Foreign corporation. Enter principal office address City State 2. Brief Description of the character of the affairs which are actually conducted in Rhode Island To create a cooperative risk management program pursant to R.I.G.L. Section 45-5-20.1 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHM President Name John F. Ward Street Address 100 Old River Road, PO Box 100 City State Zap City State Zap City State Zap Johnston RI Georetary Name	በ20በ2			
5. Brief Description of the character of the affairs which are actually conducted in Rhode Island To create a cooperative risk management program pursant to R.I.G.L. Section 45-5-20.1 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT) Vice President Name John F. Ward Joseph Chiodo Street Address 100 Old River Road, PO Box 100 1385 Hartford Avenue City State Zip City State Zip Incoln RI 158 168 168 168 168 168 168 168				
To create a cooperative risk management program pursant to R.I.G.L. Section 45-5-20.1 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT) Oseph Chiodo Street Address 100 Old River Road, PO Box 100 City State Zip City State Zip	Ľφ.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT) President Name John F. Ward Street Address 100 Old River Road, PO Box 100 State Zap Gity State Zap Lincoln RI 02865 Secretary Name FILL IN SPACES BEFORE USING ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT) Street Address Street Address Street Address: 1385 Hartford Avenue Zap Gity State Zap Zap Gity State Zap				
President Name Vice President Name John F. Ward Joseph Chiodo Street Address Street Address: 100 Old River Road, PO Box 100 1385 Hartford Avenue City State Zip City State Z _incoln RI 02865 Johnston RI 0 Secretary Name Treasurer Name Treasurer Name				
John F. Ward Joseph Chiodo Street Address 100 Old River Road, PO Box 100 1385 Hartford Avenue City State Zip City State Z _incoln RI 02865 Johnston RI 0 Secretary Name Treasurer Name Treasurer Name	ENTS			
Street Address	Vice President Name			
100 Old River Road, PO Box 100 1385 Hartford Avenue City State Zip City State Z _incoln RI 02865 Johnston RI I Secretary Name Treasurer Name				
City State Zip City State Z _incoln RI 02865 Johnston RI 0 Secretary Name Treasurer Name Treasurer Name				
_incoln RI 02865 Johnston RI 0 Secretary Name Treasurer Name				
Secretary Name Treasurer Name	Lip .			
	02919			
Joseph Chiodo Melissa Devine				
Street Address Street Address				
1385 Hartford Avenue 10 Memorial Drive				
City State Zip City State Z	(ф			
	02919			
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) 🛛 FILL IN SPACES BEFORE USING ATTACHM	IENTS .			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3	3). R.I.G.L. 7-6-1			
Director Name Director Name				
John Ward Joseph Chiodo	Joseph Chiodo			
Street Address Street Address	Street Address			
100 Old River Road, PO Box 100 1385 Hartford Avenue	1385 Hartford Avenue			
	Zip			
Lincoln RI 02865 Johnston RI 0	02919			
Director Name Director Name				
Melissa Devine Giovanna M. Donoyan Ph.D.				
Street Address Street Address				
10 Memorial Drive 2240 Mineral Spring Avenue				
City State Zip City State 2	Zip			
Johnston RI 02919 North Providence RI 0	00044			
9. REGISTERED AGENT IN RHODE ISLAND	02911			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-	02911			

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

K.	FILED
File Date _	
Check No.	JUL: 0 1 2011
BY	3543

416232

Under namely of portion, I dealers and affirm that I	Lhava avendend thi
Under penalty of perjury, I declare and affirm that I	
report, including any accompanying schedules and sta	atements, and that al
statements contained herein are true and correct.	. 1
11701 harts	6/29/11
Sibnature of Officer	Date

Joseph Chiodo

Print or Type Name of Officer

Vice President/Secretary
Title of Officer

Form 631 Rev. 09/17

Rhode Island Municipal Insurance Corporation Corp. ID #416232 2011 Annual Report – Additional Information

Additional Directors:

Thomas M. Bruce, III 169 Main Street PO Box B Woonsocket RI 02895	Steve Woerner 45 Broad Street Cumberland RI 02864
Alex Prignano	Robert Strom
2602 Mendon Road	869 Park Avenue
Cumberland RI 02864	Cranston RI 02910
Lori Miller	Maria Vallee
1624 Lonsdale Avenue	1385 Hartford Avenue
Lincoln RI 02865	Johnston RI 02919

FILED

JUL 0 1 2011

BY FD 416232