



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

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Foreign Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

*In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2012

**1. Corporate ID No.** 000505878

**2. Name of Corporation** The Risk Management and Patient Safety Institute, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 6215 W. ST. JOE HIGHWAY

City or Town: LANSING

State: MI

Zip: 48917

Country: USA

**4. Business Phone No.**

**5. State of Incorporation**

State: MI

**6. Brief Description of the Character of Business Conducted in Rhode Island**

TO SUPPORT HEALTHCARE ORGANIZATIONS

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN R KARLEN	6215 W. ST. JOE HWY. LANSING, MI 48917 USA
TREASURER	RICHARD G. HAYES	101 ARCH STREET BOSTON, MA 02110 USA
VICE PRESIDENT	JANICE W. ALLEGRETTO	101 ARCH STREET BOSTON, MA 02110 USA
ASSISTANT SECRETARY	PAUL E TRAYNOR	6215 W. ST. JOE HWY. LANSING, MI 48917 USA
CONTROLLER, ASST. TREAS	AMY T IRISH	6215 W. ST. JOE HWY. LANSING, MI 48917 USA
VICE PRESIDENT	MARY L. URSUL	6215 W. ST. JOE HIGHWAY LANSING, MI 48917 USA
GROUP VICE PRESIDENT	KAROL WARECK-RUSS	6215 W. ST. JOE HIGHWAY LANSING, MI 48917 USA
DIRECTOR	GREGG L. HANSON	101 ARCH STREET BOSTON, MA 02110 USA
DIRECTOR	JANICE W ALLEGRETTO	101 ARCH STREET BOSTON, MA 02110 USA

#### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	60,000.00	1000

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 30 Day of March, 2012 at 1:27:11 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By PAUL E. TRAYNOR  
Signature of Authorized Representative of the Corporation

ASSISTANT SECRETARY  
Title

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.**

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