## 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N00000000796

FILED Aug 12, 2010 Secretary of State

Entity Name: THE TAMPA BAY CHAPTER OF THE RISK AND INSURANCE MANAGEMENT SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

100 SOUTH ASHLEY DR

**SUITE 2150** 

TAMPA, FL 33602 US

Current Mailing Address: New Mailing Address:

100 SOUTH ASHLEY DR SUITE 2150 TAMPA, FL 33602 US

FEI Number: 59-3625594 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIVYER, NEAL A 100 SOUTH ASHLEY DRIVE SUITE 2150 TAMPA, FL 33602 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: NEAL SIVYER

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: D

Name: DELILLO, MARK

Address: 8430 ENTERPIRSE CIRCLE #100
City-St-Zip: BRADENTON, FL 34202

Title: VP

Name: MCNABB, MIKE Address: 720 ZACK STREET City-St-Zip: TAMPA, FL 33602

Title: D

Name: BENISHEK, MICHAEL
Address: 503-10TH STREET WEST
City-St-Zip: PALMETTO, FL 34220

Title:

Name: PETRUCCELLI, LUCY
Address: 2379 BROAD STREET
City-St-Zip: BROOKSVILLE, FL 34609

Title: D

Name: BOWDEN, CHARLIE

Address: 100 SOUTH ASHLEY DR #2150

City-St-Zip: TAMPA, FL 33602

Title:

Name: LAWTON, GEORGE Address: 9000 68TH STREET N.

City-St-Zip: PINELLAS PARK, FL 337824401

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GEORGE LAWTON T 08/12/2010