

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762704

FILED
Jan 16, 2009
Secretary of State

Entity Name: SOUTH FLORIDA CHAPTER-PUBLIC RISK AND INSURANCE MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

C/O RISK MANAGEMENT
100 W. ATLANTIC BLVD., SUITE 219
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

C/O ED BEECHER, RISL MGR.
100 W. ATLANTIC BLVD., SUITE 219
POMPANO BEACH, FL 33060 US

New Mailing Address:

C/O ED BEECHER, RISK MGR.
100 W. ATLANTIC BLVD., SUITE 219
POMPANO BEACH, FL 33060 US

FEI Number: 59-2173781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEECHER, EDDIE C
100 W. ATLANTIC BLVD., SUITE 219
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

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 Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: GEORGE, DARLENE
Address: 115 S. ANDREWS AVE., #210
City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: T () Delete
Name: BEECHER, EDDIE C
Address: 100 WEST ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: D () Delete
Name: SANCHEZ, DIO
Address: 524 NE 21ST CT
City-St-Zip: WILTON MANORS, FL 33305

Title: D () Delete
Name: BUSCHMAN, JAMES
Address: 400 S. FEDERAL HIGHWAY
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: MCCARTHY, JOHN
Address: 400 NW 73RD AVE
City-St-Zip: PLANTATION, FL 33317

Title: PD () Delete
Name: BRIDGES, SONIA
Address: PO BOX 025504
City-St-Zip: MIAMI, FL 331025504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GEORGE, DARLENE
Address: 115 S. ANDREWS AVE., #210
City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: SANCHEZ, DIO
Address: 524 NE 21ST CT
City-St-Zip: WILTON MANORS, FL 33305

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MUIR, KAREN
Address: 776 NE 125TH ST.
City-St-Zip: NORTH MIAMI, FL 33161

Title: D (X) Change () Addition
Name: BRIDGES, SONIA
Address: PO BOX 025504
City-St-Zip: MIAMI, FL 331025504

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDDIE C. BEECHER

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01/16/2009

Electronic Signature of Signing Officer or Director

Date