2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726409

FILED
Jan 30, 2024
Secretary of State
2692232173CC

Entity Name: FLORIDA REGISTRY OF INTERPRETERS FOR THE DEAF, INC.

Current Principal Place of Business:

638 HONEYCOMB TRAIL
SAINT AUGUSTINE, FL 32095

Current Mailing Address:

PO BOX 273831
TAMPA, FL 33688 US

FEI Number: 52-1232313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORRIS, SHAWN
638 HONEYCOMB TRAIL
SAINT AUGUSTINE, FL 32095 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: SHAWN NORRIS 01/30/2024

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	NORRIS, SHAWN
Address	PO BOX 273831
City-State-Zip:	TAMPA FL 33688

Title	TREASURER
Name	ELLISON, KAYLA
Address	PO BOX 273831
City-State-Zip:	TAMPA FL 33688

Title	VICE PRESIDENT OF EXTERNAL AFFAIRS
Name	SMITH, JAMES
Address	PO BOX 273831
City-State-Zip:	TAMPA FL 33688

Title	DEAF MEMBER AT LARGE
Name	MARUCA, DAVID
Address	PO BOX 273831
City-State-Zip:	TAMPA FL 33688

Title	VICE PRESIDENT OF INTERNAL AFFAIRS
Name	ARIAS, KATRYNA
Address	PO BOX 273831
City-State-Zip:	TAMPA FL 33688

Title	SECRETARY
Name	LOWERY, GENAERE
Address	PO BOX 273831
City-State-Zip:	TAMPA FL 33688

Title	MEMBER AT LARGE
Name	HOOVER, MARY
Address	PO BOX 273831
City-State-Zip:	TAMPA FL 33688

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: KAYLA ELLISON TREASURER 01/30/2024

Electronic Signature of Signing Officer/Director Detail — Date