2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726409

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

FILED Feb 13, 2023 Secretary of State 7119011439CC

Date

Date

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 02/13/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

Name

Title PRESIDENT Title VICE PRESIDENT OF INTERNAL

NORRIS, SHAWN

Address PO BOX 273831

Name ARIAS, KATRYNA

Address PO BOX 273831

City-State-Zip: TAMPA FL 33688

City-State-Zip: TAMPA FL 33688

Title TREASURER Title SECRETARY

Name ELLISON, KAYLA Name LOWERY, GENAERE
Address PO BOX 273831

Address PO BOX 273831
City-State-Zip: TAMPA FL 33688

City-State-Zip: TAMPA FL 33688

Title VICE PRESIDENT OF EXTERNAL AFFAIRS Title MEMBER AT LARGE

Name MAGEE, SHONNA Name HOOVER, MARY
Address PO BOX 273831 Address PO BOX 273831

City-State-Zip: TAMPA FL 33688 City-State-Zip: TAMPA FL 33688

Title DEAF MEMBER AT LARGE

Name SMITH, JAMES
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 02/13/2023