

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762704

Entity Name: SOUTH FLORIDA CHAPTER-PUBLIC RISK AND INSURANCE
MANAGEMENT ASSOCIATION, INC.**FILED**
Jan 24, 2023
Secretary of State
0398985303CC**Current Principal Place of Business:**1423 PLUNKETT STREET
HOLLYWOOD, FL 33020**Current Mailing Address:**C/O JOHN MCCARTHY, RISK MGR.
1423 PLUNKETT STREET
HOLLYWOOD, FL 33020 US**FEI Number: 80-0791700****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MCCARTHY, JOHN
1423 PLUNKETT STREET
HOLLYWOOD, FL 33020 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: JOHN MCCARTHY****01/24/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** SECRETARY
Name LUGO, JOSE
Address 6591 ORANGE DRIVE
City-State-Zip: DAVIE FL 33314**Title** OFFICER
Name BEECHER, EDDIE C
Address 100 WEST ATLANTIC BLVD.
City-State-Zip: POMPANO BEACH FL 33060**Title** TREASURER
Name MCCARTHY, JOHN
Address 1423 PLUNKETT STREET
City-State-Zip: HOLLYWOOD FL 33020**Title** PRESIDENT
Name HINE, GUY
Address 101 NE 3RD AVE
City-State-Zip: FT. LAUDERDALE FL 33301**Title** DIRECTOR
Name MUIR, KAREN
Address 776 NE 125TH ST.
City-State-Zip: NORTH MIAMI FL 33161**Title** DIRECTOR
Name BOULAY, TANYA
Address 2600 HOLLYWOOD BLVD
City-State-Zip: HOLLYWOOD FL 33020**Title** OFFICER
Name BUSCHMAN, JAMES
Address 400 SOUTH FEDERAL HWY
City-State-Zip: HALLANDALE BEACH FL 33009**Title** DIRECTOR
Name HEALD, JEAN
Address 100 AUSTRALIAN AVE
SUITE-100
City-State-Zip: WEST PALM BEACH FL 33406**Continues on page 2**

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: JOHN MCCARTHY**TREASURER****01/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name BOLTON, NANCY L.
Address 3300 FOREST HILL BLVD
A-103
City-State-Zip: WEST PALM BEACH FL 33406

Title OFFICER
Name STAKERMAN , KATHY
Address 7525 NW 88TH AVE
City-State-Zip: TAMARAC FL 33321

Title OFFICER
Name LAURENCE, CINDY
Address 100 WEST ATLANTIC BLVD
City-State-Zip: POMPANO BEACH FL 33060