

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001282

**FILED**  
**Jan 05, 2022**  
**Secretary of State**  
**4860264177CC**

**Entity Name:** NORTHEAST FLORIDA CHAPTER OF THE RISK AND INSURANCE MANAGEMENT SOCIETY, INC.

**Current Principal Place of Business:**

C/O THOMAS GLAVIN  
9540 SAN JOSE BLVD  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

P.O. BOX 57073  
JACKSONVILLE, FL 32241 US

**FEI Number: 59-3635840**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            SECRETARY  
Name            GUTH, TYLER L.  
Address        4401 WORTH DR E  
City-State-Zip: JACKSONVILLE FL 32207

Title            VP  
Name            WRIGHT, ZAK  
Address        111 RIVERSIDE AVE  
City-State-Zip: JACKSONVILLE FL 32202

Title            PRESIDENT  
Name            TAURO, DEBORAH  
Address        11625 OLD ST. AUGUSTINE ROAD  
City-State-Zip: JACKSONVILLE FL 32258

Title            TREASURER  
Name            GLAVIN, THOMAS M  
Address        9540 SAN JOSE BLVD  
City-State-Zip: JACKSONVILLE FL 32257

*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: THOMAS GLAVIN**

**TREASURER**

**01/05/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date