

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 20, 2015
Secretary of State
CC1161611469

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

Current Principal Place of Business:

LCEC
4980 BAYLINE DRIVE
NORTH FT MYERS, FL 33917

Current Mailing Address:

LCEC ATTN: WAYNE FIYALKO
P O BOX 3455
NORTH FT MYERS, FL 33918 US

FEI Number: 65-1125939

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIYALKO, WAYNE
LCEC ATTN: WAYNE FIYALKO
4980 BAYLINE DRIVE
NORTH FT MYERS, FL 33917 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: WAYNE FIYALKO 01/20/2015
Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	VP	Title	PRES
Name	MARY, DANIELS	Name	FIYALKO, WAYNE
Address	5925 BERMUDA LANE	Address	LCEC, POST OFFICE 3455
City-State-Zip:	NAPLES FL 34119	City-State-Zip:	NORTH FORT MYERS FL 33918
Title	T		
Name	CUMMINGS-BECK, GILLIAN		
Address	3040 OASIS GRAND BLVD #1408		
City-State-Zip:	FORT MYERS FL 33916		

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: WAYNE FIYALKO PRESIDENT 01/20/2015
Electronic Signature of Signing Officer/Director Detail Date