

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008109

Entity Name: SOUTHWEST FLORIDA CHAPTER OF THE RISK AND
INSURANCE MANAGEMENT SOCIETY, INC.**FILED**
Feb 07, 2024
Secretary of State
2443136892CC**Current Principal Place of Business:**5925 BERMUDA LANE
C/O MARY DANIELS
NAPLES, FL 34119**Current Mailing Address:**5925 BERMUDA LANE
C/O MARY DANIELS
NAPLES, FL 34119 US**FEI Number:** 65-1125939**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEROY, CINDY
5925 BERMUDA LANE
C/O MARY DANIELS
NAPLES, FL 34119 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:** CINDY LEROY

02/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	DANIELS, MARY
Address	5925 BERMUDA LANE C/O MARY DANIELS
City-State-Zip:	NAPLES FL 34119

Title	PRES
Name	LEROY, CINDY
Address	5925 BERMUDA LANE C/O MARY DANIELS
City-State-Zip:	NAPLES FL 34119

Title	TREASURER
Name	ROTH, JAY
Address	1395 PANTHER LANE SUITE 100
City-State-Zip:	NAPLES FL 34109

Title	DIRECTOR
Name	WEGER, ALICE
Address	5925 BERMUDA LANE C/O MARY DANIELS
City-State-Zip:	NAPLES FL 34119

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: JAY ROTH**TREASURER**

02/07/2024

Electronic Signature of Signing Officer/Director Detail

Date