

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000004954

**Entity Name:** SPACE COAST PUBLIC PERSONNEL/RISK MANAGEMENT ASSOCIATION, INC.

**FILED**  
**Feb 26, 2014**  
**Secretary of State**  
**CC5821287292**

**Current Principal Place of Business:**

120 MALABAR ROAD SE.  
PALM BAY, FL 32907

**Current Mailing Address:**

120 MALABAR ROAD SE  
PALML BAY , FL 32907 US

**FEI Number: 45-2513624**

**Certificate of Status Desired: Yes**

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

BOYLL, SUZANNE M  
900 EAST STRAWBRIDGE AVE  
MELBOURNE, FL 32901 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: SUZANNE M. BOYLL**

**02/26/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name CLAWSON, LAURA A  
Address 120 MALABAR ROAD SE  
City-State-Zip: PALM BAY FL 32907

Title SECRETARY  
Name GOMEZ, ADRIANA  
Address 120 MALABAR ROAD SE  
City-State-Zip: PALM BAY FL 32907

Title T  
Name FISHER, JACKLIN  
Address 120 MALABAR ROAD SE  
City-State-Zip: PALML BAY FL 32907

Title PRESIDENT  
Name BOYLL, SUZANNE M  
Address 900 E STRAWBRIDGE AVE  
City-State-Zip: MELBOURNE FL 32901

*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: SUZANNE M. BOYLL**

**PRESIDENT**

**02/26/2014**

Electronic Signature of Signing Officer/Director Detail

Date