FLORIDA NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT (AR)

DOCUMENT # N01000003389

1. Entity Name

TAMPA BAY PUBLIC RISK MANAGERS ASSOCIATION, INC.

FILED
04 DEC 10 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1112 E. KENNEDY BOULEVARD TAMPA FL 33602	1112 E. KENNEDY BOULEVARD TAMPA FL 33602

04-12-04 90650 017 861.25
MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
Tampa Bay PRIMA Chapter P.O. Box 173691 Tampa, FL 33672-3691	P.O. Box 173691 TAMPA, FL 33677
Suite, Apt. #, etc. / City & State	Suite, Apt. #, etc. / City & State
Zip / Country	Zip / Country

4. FEI Number 59-3744363 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JORDAN-HOLMES, CLARK 1112 E. KENNEDY BOULEVARD TAMPA FL 33602	Name: JOHN MC COY Street Address (P.O. Box Number is Not Acceptable): ONE 4TH ST. N - 4TH FLOOR City: ST. PETERSBURG FL Zip Code: 33701

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25 Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEBB, DAVID M 1101 CHANNELSIDE DRIVE TAMPA FL 33602	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	REINSTATEMENT 04 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MURANO, DOMINICK 400 S. FORT HARRISON ST., 3RD FLOOR CLEARWATER FL 33756	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D John W. McCoy One 4th St. N. - 4th Floor St. Petersburg, Fl 33701 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCNABB, MICHAEL 107 E. 7TH AVENUE TAMPA FL 33602	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JR 12/10 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John W. McCoy John W. McCoy 4/7/04 7278937582
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

TAMPA BAY PRIMA CHAPTER
P.O. Box 173691
Tampa, FL 33672-3691

12/6/04

Division of Corporations
PO Box 6198
Tallahassee, FL 32314-6198
Attn: Sean Toner

RE: LETTER 504A00064873

Good Day:

This letter is in response to the letter referenced above.

We did not receive the notice dated April 15, 2004. Please find the enclosed copy with a corrected Florida street address.

Advise if require additional information and/or forms.

Upon receipt, please call me at (813) 905-5173 or John McCoy, Chapter President at (727) 893-7582.

Thank you,

Stewart Slayton
Chapter Treasurer

Enclosures