

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009680

FILED  
Feb 21, 2005  
Secretary of State

**Entity Name:** FINANCIAL INSTITUTIONS RISK MANAGEMENT ASSOCIATION,INC.

**Current Principal Place of Business:**

15748 SW 102ND LANE  
MIAMI, FL 33196

**New Principal Place of Business:**

**Current Mailing Address:**

15748 SW 102ND LANE  
MIAMI, FL 33196

**New Mailing Address:**

**FEI Number:** 20-1738574      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

INCORPORATE USA, INC.  
3150 SANDY RIDGE DR  
CLEARWATER, FL 33761      US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MEJIA, RAFAEL D  
Address: 15748 SW 102ND LA  
City-St-Zip: MIAMI, FL 33196

Title: VP ( ) Delete  
Name: MEJIA, MARIA D  
Address: 15748 SW 102ND LANE  
City-St-Zip: MIAMI, FL 33196

Title: T ( ) Delete  
Name: JIMENEZ, MIRIAM  
Address: 15748 SW 102ND LANE  
City-St-Zip: MIAMI, FL 33196

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: EVP (X) Change ( ) Addition  
Name: RYAN, JACK  
Address: 8600 NW 36TH STREET, 8TH FLOOR  
City-St-Zip: MIAMI, FL 33166

Title: S (X) Change ( ) Addition  
Name: VINA, MERCEDES  
Address: 8600 NW 36TH STREET, 8TH FLOOR  
City-St-Zip: MIAMI, FL 33166

Title: T ( ) Change (X) Addition  
Name: ESCOTO, MARIA  
Address: 8600 NW 36TH STREET, 8TH FLOOR  
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: RAFAEL MEJIA

P

02/21/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date