

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002668

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** SARASOTA CHAPTER OF THE RISK MANAGEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

1777 MAIN STREET  
6TH FLOOR  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

1777 MAIN STREET  
6TH FLOOR  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 32-0224838

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BERGGREN, LYNNE  
1801 GLENGARY STREET  
SARASOTA, FL 34236 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  
Name: SCHNEIDER, JOHNATHAN  
Address: 8704 E STATE ROAD 70  
City-St-Zip: BRADENTON, FL 34202

Title: VP  
Name: JONES, JAMIE  
Address: 1100 SOUTH TAMiami TRAIL  
City-St-Zip: SARASOTA, FL 34236

Title: S  
Name: CORDONNIER, ADAM  
Address: 2301 RINGLING BOULEVARD  
City-St-Zip: SARASOTA, FL 34237

Title: T  
Name: HARRIS, DAN  
Address: 1990 MAIN STREET, SUITE 901  
City-St-Zip: SARASOTA, FL 34236

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: DAN HARRIS

T

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date