

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000002294

1. Entity Name

INTERNATIONAL SERVICE AGENCIES, INC.

Principal Place of Business

66 CANAL CENTER PLAZA  
SUITE 310  
ALEXANDRIA VA 22314

Mailing Address

66 CANAL CENTER PLAZA  
SUITE 310  
ALEXANDRIA VA 22314

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-1273585

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

SULLIVAN, MIKE  
17430 DURRANCE ROAD  
N. FORT MYERS FL 33917

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
C  
ZUERCHER, DAVID J  
525 MARKET ST -25TH FLR  
SAN FRANCISCO CA 94105 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BREMER, KATHARINE DAY  
1040 CROWN POINTE PKWY  
ATLANTA GA ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
3348 Peachtree Rd., NE, Suite 300  
Atlanta, GA 30326

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ANGLE, RICHARD W. JR.  
52 UNCAS CIR  
GUILFORD CT 06437 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
VP/CEO  
Murphy, Stephanie  
66 Canal Center Plaza, Suite 310  
Alexandria, VA 2214

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TS  
SPRUNGER, JOSEPH  
99 LINDEN AVE  
METUCHEN NJ 08840 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
TS  
Fleishman, H. Kenneth  
7475 Wisconsin Ave., Suite 700  
Bethesda, MD 20814-3417

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
BEARDSLEY, JOHN  
224 FRANKLIN AVE WEST  
MINNEAPOLIS MN 55404-2394 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☒ Addition  
VC

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
ACOSTA, RENEE S.  
66 CANAL CENTER PLAZA, SUITE 310  
ALEXANDRIA VA 22314 ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephanie Murphy 2/25/01

703-548-2200

Date

Daytime Phone #

CR2E037 (10/00)

FILED  
Mar 22, 2001 8:00 am  
Secretary of State

03-22-2001 90038 011 \*\*\*\*61.25

CU036841



DO NOT WRITE IN THIS SPACE