

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000000042

**Entity Name:** I SEIRBHISE, INC.

**Current Principal Place of Business:**

12249 SONNET AVE  
ORLANDO, FL 32832

**Current Mailing Address:**

12249 SONNET AVE  
ORLANDO, FL 32832 US

**FEI Number:** 84-3941185

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH ST N STE 300  
ST. PETERSBURG, FL 33702 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, CHAIRMAN  
Name            JACKSON, PAUL A  
Address        12249 SONNET AVE  
City-State-Zip: ORLANDO FL 32832

Title            VP, VC  
Name            CURTIS, KRISTEN  
Address        3202 SOLSTICE LOOP  
City-State-Zip: SANFORD FL 32771

Title            SECRETARY, DIRECTOR  
Name            ROMAN-STUMPPFF, CRYSTAL  
Address        2137 CORNER SCHOOL DR  
City-State-Zip: ORLANDO FL 32820

Title            TREASURER, DIRECTOR  
Name            MURPHY, ARYN R  
Address        5808 MANCHESTER BRIDGE DR  
City-State-Zip: ORLANDO FL 32829

*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:** PAUL JACKSON

**PRESIDENT**

**03/15/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date