

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001149

Entity Name: SKRILL USA, INC.

Current Principal Place of Business:

5335 GATE PARKWAY
4TH FLOOR
JACKSONVILLE, FL 32256

Current Mailing Address:

5335 GATE PARKWAY
4TH FLOOR
JACKSONVILLE, FL 32256 US

FEI Number: 30-0508113

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name CUTLER, ZAKARY
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name SKENE-STIMAC, PHYLLIS
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Title CFO
Name BARRIOS-BALBIN, JULISSA
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Title SECRETARY
Name RABINOVITCH, LANA
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Title CEO
Name CUTLER, ZAKARY
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Title CHIEF COMPLIANCE OFFICER
Name SAGARO, ALEXANDRA
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Title COO
Name CUTLER, ZAK
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name BARRIOS-BALBIN, JULISSA
Address 5335 GATE PARKWAY
4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256

Continues on page 2

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LANA RABINOVITCH

SECRETARY

04/09/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SCHLAPBACH, DAVID
Address 5335 GATE PARKWAY
 4TH FLOOR
City-State-Zip: JACKSONVILLE FL 32256