

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000004439

**Entity Name:** ASURION DELIVERY AND INSTALLATION SERVICES, INC.

**Current Principal Place of Business:**

22894 PACIFIC BLVD.  
STERLING, VA 20166

**FILED**  
**Mar 24, 2023**  
**Secretary of State**  
**1693536757CC**

**Current Mailing Address:**

140 11TH AVE N  
ATTN: LICENSING DEPT.  
NASHVILLE, TN 37203 US

**FEI Number: 33-1024505**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC  
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 CHAIRMAN  
Name TAWHEEL, KEVIN  
Address 160 BOVET RD  
STE 402  
City-State-Zip: SAN MATEO CA 94402

Title SENIOR VICE PRESIDENT AND  
TREASURER  
Name MAGYERA, ANDREA  
Address 140 11TH AVE N  
ATTN: LICENSING DEPT.  
City-State-Zip: NASHVILLE TN 37203

Title SENIOR VICE PRESIDENT, GENERAL  
COUNSEL AND SECRETARY  
Name PURYEAR, GUSTAVUS A IV  
Address 140 11TH AVE N  
ATTN: LICENSING DEPT.  
City-State-Zip: NASHVILLE TN 37203

Title ASSISTANT SECRETARY  
Name GAUL, KRISTEN  
Address 140 11TH AVE N  
ATTN: LICENSING DEPT.  
City-State-Zip: NASHVILLE TN 37203

Title VICE PRESIDENT AND ASSISTANT  
TREASURER  
Name ALEXANDER, ELIZABETH  
Address 140 11TH AVE N  
ATTN: LICENSING DEPT.  
City-State-Zip: NASHVILLE TN 37203

Title ASSISTANT TREASURER  
Name EBERSBERGER, HEATHER  
Address 140 11TH AVE N  
ATTN: LICENSING DEPT.  
City-State-Zip: NASHVILLE TN 37203

Title CEO, PRESIDENT, AND DIRECTOR  
Name DETTER, ROGER  
Address 160 BOVET RD  
STE 402  
City-State-Zip: SAN MATEO CA 94402

Title SENIOR VICE PRESIDENT, CFO, AND  
DIRECTOR  
Name STOREY, JOHN  
Address 140 11TH AVE N  
ATTN: LICENSING DEPT.  
City-State-Zip: NASHVILLE TN 37203

**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: JOHN STOREY**

**DIRECTOR**

**03/24/2023**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SENIOR VICE PRESIDENT AND ASSISTANT  
TREASURER

Name SANSOM, MICHAEL

Address 140 11TH AVE N  
ATTN: LICENSING DEPT.

City-State-Zip: NASHVILLE TN 37203