2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State
03-22-2001 90038 011 ****61.25

DOCUMENT # F93000002294

1. Entity Name

INTERNATIONAL SERVICE AGENCIES, INC.

Principal Place of Business	Mailing Address
66 CANAL CENTER PLAZA SUITE 310 ALEXANDRIA VA 22314	66 CANAL CENTER PLAZA SUITE 310 ALEXANDRIA VA 22314

000036841

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	VP/CFO ☐ Change ☐ Addition 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	TS ☐ Change ☐ Addition 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	VC ☐ Change ☒ Addition
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

CR2E037 (10/00)

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 REQUIRED Stephanie Murphy 2/28/01 703-548-2200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #