

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004901

**Entity Name:** POLIS INSTITUTE, INC.

**Current Principal Place of Business:**

2043 JACOBS PLACE  
ORLANDO, FL 32805

**Current Mailing Address:**

PO BOX 560531  
ORLANDO, FL 32856

**FEI Number:** 27-0226465

**Certificate of Status Desired:** No

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

MAROON, BAHIIYAH PHD  
2043 JACOBS PLACE  
ORLANDO, FL 32805 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:** BAHIIYAH MAROON

06/16/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VICE CHAIR  
Name MATHIS, JACINTA  
Address 225 N. FRENCH AVENUE  
City-State-Zip: SANFORD FL 32771

Title DIRECTOR  
Name MAJUMDAR, INDER  
Address 901 INTERNATIONAL PKWY SUITE 100  
City-State-Zip: LAKE MARY FL 32746

Title CHAIR  
Name JONES, EUGENE  
Address 1800 SOUTH KIRKMAN ROAD  
City-State-Zip: ORLANDO FL 32811

Title TREASURER  
Name NORMAN, RYAN  
Address 1928 SANTA ANTILLES RD  
City-State-Zip: ORLANDO FL 32806

Title DIRECTOR  
Name ZAIBACK, JULIE  
Address 900 HOPE WAY  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR  
Name SHEPHERD, LEAH  
Address 735 BROOKHAVEN DR  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name EVANS, ADRIENNE  
Address 2043 JACOBS PL  
City-State-Zip: ORLANDO FL 32805

Title DIRECTOR  
Name HISSOM, PHILIP  
Address 2043 JACOBS PLACE  
City-State-Zip: ORLANDO FL 32805

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

**SIGNATURE:** BAHIIYAH MAROON

CEO

06/16/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title CEO  
Name MAROON, BAHIIYAH PHD  
Address 2043 JACOBS PLACE  
City-State-Zip: ORLANDO FL 32805