2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600293

Entity Name: STERN, DRAKE, ISBELL & ASSOCIATES, P.A.

Current Principal Place of Business:

4516 N. ARMENIA AVE. TAMPA, FL 33603

Current Mailing Address:

4516 N. ARMENIA AVE. TAMPA. FL 33603 US

FEI Number: 59-1202496 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SWARTZ, PAUL 4516 N. ARMENIA AVE TAMPA, FL 33603 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: PAUL SWARTZ 02/06/2025

Electronic Signature of Registered Agent

Date

FILED Feb 06, 2025

Secretary of State

4924532511CC

Officer/Director Detail:

Title DIRECTOR Title VΡ

VANEPPS, KELLY WOESTE, TROY Name Name

4516 NORTH ARMANIA AVE Address Address 4516 NORTH ARMANIA AVE

City-State-Zip: TAMPA FL 33603 TAMPA FL 33603 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name BABIN, DAVID Name BERLET, MATTHEW

Address 4516 N. ARMENIA AVE. Address 4516 NORTH ARMANIA AVE

TAMPA FL 33603 City-State-Zip: City-State-Zip: TAMPA FL 33603

Title DIRECTOR Title **DIRECTOR**

Name BERNSTEIN, PETER Name BELLON, LANA Address 4516 N. ARMENIA AVE. Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603 TAMPA FL 33603 City-State-Zip:

Title **PRESIDENT** Title DIRECTOR SWARTZ, PAUL Name MONTAGUE, BRIAN Name

4516 N. ARMENIA AVE. Address 4516 N. ARMENIA AVE. Address City-State-Zip: TAMPA FL 33603 TAMPA FL 33603 City-State-Zip:

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.

02/06/2025 SIGNATURE: PAUL SWARTZ **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name YOUSSEF, MICHAEL
Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name NARVAEZ-SOTO, GIL Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name MONROE, CYRUS

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name PATEL, SANDIP

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name TELFORD, RYAN

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name KIM, SOO

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name SHRINER, ROBERT
Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name VALIVETI, PRAKASH Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name MCLAUGHLIN, EDWARD Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name JACOBSON, MAX

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name COTTRELL, JEFFREY
Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name PANSARA, ANKIT

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name MURTAGH, KEVIN

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name ROZAS, ALEXANDRA

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name RIZZARDI, CORY

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name LAZO, CHRISTOPHER

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name TURMAN, NICHOLAS

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name MAMOUN, IHSAN

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603

Title DIRECTOR

Name PATEL, KUNAL

Address 4516 N. ARMENIA AVE.

City-State-Zip: TAMPA FL 33603