

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000414

Entity Name: BROADSPIRE SERVICES, INC.**Current Principal Place of Business:**5335 TRIANGLE PARKWAY
PEACHTREE CORNERS, GA 30092**Current Mailing Address:**5335 TRIANGLE PARKWAY
PEACHTREE CORNERS, GA 30092 US**FEI Number: 37-3917295****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	TREASURER
Name	WELCH, THOMAS J
Address	5335 TRIANGLE PARKWAY
City-State-Zip:	PEACHTREE CORNERS GA 30092

Title	ASSISTANT VP
Name	JADICK, GREGORY
Address	5335 TRIANGLE PARKWAY
City-State-Zip:	PEACHTREE CORNERS GA 30092

Title	ASSISTANT VP
Name	JONES, WILLIAM S.
Address	5335 TRIANGLE PARKWAY
City-State-Zip:	PEACHTREE CORNERS GA 30092

Title	CEO, DIRECTOR, PRESIDENT
Name	LISENBEY, DANIELLE M
Address	5335 TRIANGLE PARKWAY
City-State-Zip:	PEACHTREE CORNERS GA 30092

Title	ASSISTANT VP
Name	CONNELLY, MARK
Address	5335 TRIANGLE PARKWAY
City-State-Zip:	PEACHTREE CORNERS GA 30092

Title	SVP, SECRETARY, DIRECTOR
Name	BLANCO, JOSEPH O
Address	5335 TRIANGLE PARKWAY
City-State-Zip:	PEACHTREE CORNERS GA 30092

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: JOSEPH O. BLANCO**SVP****04/23/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date