

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005114

Entity Name: INSURANCEZEBRA, INC.

Current Principal Place of Business:

98 SAN JACINTO BLVD
STE 2000
AUSTIN, TX 78701

FILED
May 23, 2020
Secretary of State
7681335040CC

Current Mailing Address:

98 SAN JACINTO BLVD
STE 2000
AUSTIN, TX 78701 US

FEI Number: 45-4235904

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
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 CEO
Name MELNICK, KEITH
Address 98 SAN JACINTO BLVD
 STE 2000
City-State-Zip: AUSTIN TX 78701

Title TREASURER / CFO
Name LYONS, ADAM
Address 98 SAN JACINTO BLVD
 STE 2000
City-State-Zip: AUSTIN TX 78701

Title SECRETARY
Name LYONS, ADAM
Address 98 SAN JACINTO BLVD
 STE 2000
City-State-Zip: AUSTIN TX 78701

Title CHAIRMAN OF THE BOARD
Name LYONS, ADAM
Address 98 SAN JACINTO BLVD
 STE 2000
City-State-Zip: AUSTIN TX 78701

Title DIRECTOR
Name LYONS, ADAM
Address 98 SAN JACINTO BLVD
 STE 2000
City-State-Zip: AUSTIN TX 78701

Title PRESIDENT
Name LYONS, ADAM
Address 98 SAN JACINTO BLVD
 STE 2000
City-State-Zip: AUSTIN TX 78701

Title COO
Name DZIABIAK, JOSHUA
Address 98 SAN JACINTO BLVD
 STE 2000
City-State-Zip: AUSTIN TX 78701

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: ADAM LYONS

PRESIDENT

05/23/2020

Electronic Signature of Signing Officer/Director Detail

Date