

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000218

Entity Name: ALLIANCE FOR SCHOOL CHOICE, INC.**Current Principal Place of Business:**1020 19TH STREET NW
SUITE 675
WASHINGTON, DC 20036**Current Mailing Address:**1020 19TH STREET NW
SUITE 675
WASHINGTON, DC 20036 US**FEI Number:** 52-2111508**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:** JENNIFER KURZ, ASST SECRETARY

04/05/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name WALKER, HON. GOVERNOR SCOTT
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name SHIVERICK, PAUL
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name NASSIF, SISTER ROSEMARIE
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name MCDERMOTT, EDWARD
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name LIEBERMAN, HON. SENATOR JOE
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name HUBBARD, KATHY
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name HASLAM, JIMMY
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name DUPLESSIS, HON. ANN
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

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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: KATHY HUBBARD

SECRETARY

04/05/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CHAVOUS, HON. KEVIN
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title VICE CHAIRMAN OF THE BOARD
Name KIRTLEY, JOHN
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title SECRETARY
Name HUBBARD, KATHY
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title COO
Name CLEMENTS, ELISA
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR
Name BARFIELD, LEE
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title CHAIRMAN OF THE BOARD
Name OBERNDORF, WILLIAM
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title CFO
Name MILLER, JENNIFER
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036

Title PRESIDENT
Name SCHILLING, JOHN
Address 1020 19TH STREET NW
SUITE 675
City-State-Zip: WASHINGTON DC 20036