

**2020 FOREIGN NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F05000000218

**Entity Name:** ALLIANCE FOR SCHOOL CHOICE, INC.**Current Principal Place of Business:**1020 19TH ST NW  
STE 675  
WASHINGTON, DC 20036**Current Mailing Address:**1020 19TH ST NW  
STE 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

08/07/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title DIRECTOR  
Name KIRTLEY, JOHN  
Address 1020 19TH ST NW  
STE 675  
City-State-Zip: WASHINGTON DC 20036

Title DIRECOTR  
Name OBERNDORF, WILLIAM  
Address 1020 19TH ST NW  
STE 675  
City-State-Zip: WASHINGTON DC 20036

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

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

Title DIRECTOR  
Name LIEBREMAN, JOSEPH HON.  
Address 1020 19TH ST NW  
STE 675  
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR  
Name CHAVOUS, KEVIN  
Address 1020 19TH ST NW  
STE 675  
City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR  
Name SHIVERICK, PAUL  
Address 1020 19TH ST NW  
STE 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:** JOHN SCHILLING

PRESIDENT

08/07/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            CEO  
Name            BROCK, GREGORY  
Address        1020 19TH ST NW  
                  STE 675  
City-State-Zip: WASHINGTON DC 20036

Title            DIRECTOR  
Name            DUPLESSIS, ANN  
Address        1020 19TH ST NW  
                  STE 675  
City-State-Zip: WASHINGTON DC 20036

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

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

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

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

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