

**2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000003729

**Entity Name:** THE INTERNATIONAL ASSOCIATION OF CHIEFS OF POLICE,  
INCORPORATED**FILED**  
**Jun 01, 2020**  
**Secretary of State**  
**4435645630CC****Current Principal Place of Business:**44 CANAL CENTER PLAZA  
SUITE 200  
ALEXANDRIA, VA 22314-1579**Current Mailing Address:**44 CANAL CENTER PLAZA  
SUITE 200  
ALEXANDRIA, VA 22314-1579 US**FEI Number: 53-0227813****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: CT CORPORATION****06/01/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name LAINE, RUSSELL  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name VILLANUEVA, RAY  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name ZIMAN, KRISTEN  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name JOHNSON, WILL  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name CARPENTER, WADE  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name LETTENY, JOHN  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name HENNINGER, DWIGHT  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name CELL, PAUL  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

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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: VINCENT TALUCCI****SECRETARY****06/01/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name WALKER, KEN  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name RENAUD, CYNTHIA  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title TREASURER  
Name WALKER, KEN  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title SECRETARY  
Name TALUCCI, VINCENT  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title PRESIDENT  
Name CASSTEVENS, STEVEN  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name TALUCCI, VINCENT  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title DIRECTOR  
Name CASSTEVENS, STEVEN  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title VP  
Name WALKER, KEN  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579

Title VP  
Name RENAUD, CYNTHIA  
Address 44 CANAL CENTER PLAZA  
SUITE 200  
City-State-Zip: ALEXANDRIA VA 22314-1579