

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003547

Entity Name: THE WASHINGTON INSTITUTE FOR NER EAST POLICY, INC.**Current Principal Place of Business:**1111 19TH STREET, NW, SUITE 500
WASHINGTON, DC 20036**Current Mailing Address:**1111 19TH STREET, NW, SUITE 500
WASHINGTON, DC 20036 US**FEI Number: 52-1376034****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AUFSEESER, JEANNE
9625 CAMPI DRIVE
LAKEWORTH, FL 33467 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 WAGNER, SUSAN
Address 1111 19TH STREET, NW, SUITE 500
City-State-Zip: WASHINGTON DC 20036

Title SECRETARY
Name BOROW, RICHARD
Address 1111 19TH STREET, NW, SUITE 500
City-State-Zip: WASHINGTON DC 20036

Title PRESIDENT
Name KASSEN, SHELLY
Address 1111 19TH STREET, NW, SUITE 500
City-State-Zip: WASHINGTON DC 20036

Title D
Name BEYER, ANTHONY
Address 1111 19TH STREET, NW, SUITE 500
City-State-Zip: WASHINGTON DC 20036

Title CHAIRMAN
Name SCHREIBER, JAMES
Address 1111 19TH STREET, NW, SUITE 500
City-State-Zip: WASHINGTON DC 20036

Title CFO
Name HANNAH, LAURA
Address 1111 19TH STREET, NW, SUITE 500
City-State-Zip: WASHINGTON DC 20036

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: LAURA HANNAH**CHIEF FINANCIAL
OFFICER****07/15/2019**

Electronic Signature of Signing Officer/Director Detail

Date