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

DOCUMENT# F12000003547

Entity Name: THE WASHINGTON INSTITUTE FOR NER EAST POLICY, INC.

FILED
Jun 30, 2020
Secretary of State
3222109559CC

# **Current Principal Place of Business:**

1111 19TH STREET, NW, SUITE 500 WASHINGTON. DC 20036

## **Current Mailing Address:**

111119TH 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 Title D

Name WAGNER, SUSAN Name BEYER, ANTHONY

Address 1111 19TH STREET, NW, SUITE 500 Address 1111 19TH STREET, NW, SUITE 500

City-State-Zip: WASHINGTON DC 20036 City-State-Zip: WASHINGTON DC 20036

Title SECRETARY Title PRESIDENT

Name ABRAMS, JEFFREY I Name BERNSTEIN, JAY

Address 1111 19TH STREET, NW, SUITE 500 Address 1111 19TH STREET, NW, SUITE 500

City-State-Zip: WASHINGTON DC 20036 City-State-Zip: WASHINGTON DC 20036

Title CHAIRMAN Title CFO

Name KASSEN, SHELLY Name HANNAH, LAURA

Address 1111 19TH STREET, NW, SUITE 500 Address 1111 19TH STREET, NW, SUITE 500

City-State-Zip: WASHINGTON DC 20036 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 CFO 06/30/2020