

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000000519

**Entity Name:** THE ATLAS ECONOMIC RESEARCH FOUNDATION INC**Current Principal Place of Business:**4075 WILSON BLVD SUITE 310  
ARLINGTON, VA 22203**Current Mailing Address:**4075 WILSON BLVD SUITE 310  
ARLINGTON, VA 22203 US**FEI Number:** 94-2763845**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MENDIVE & GARCIA, LLC  
ATTN: ANGEL GARCIA  
250 CATALONIA AVENUE #705  
CORAL GABLES, FL 33134 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 CEO  
Name LIPS, BRADLEY  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR, CHAIRMAN  
Name GIBBS, DEBBI  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR, VC  
Name BARBEE, SCOTT  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name WASHBURN, KATHREEN  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name BOYD, ROBERT  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name BADER, LAWSON  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title PRESIDENT  
Name WARNER, MATT  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title COO  
Name PRICE, KATHERINE  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

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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:** KATHERINE PRICE

COO

01/19/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name EDWARDS, LINDA  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name BEACH, THOMAS  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name SHAH, PARTH  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name GROSSMAN, DAN  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name SPENCER, LAURA ANN  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title EXECUTIVE VICE-PRESIDENT OF  
INTERNATIONAL PROGRAMS  
Name PALMER, TOM G  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name GRUFFAT, JEAN-CLAUDE  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name BROWN, MONTGOMERY  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR  
Name OHRSTROM, GERRY  
Address 4075 WILSON BLVD SUITE 310  
City-State-Zip: ARLINGTON VA 22203