

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

DOCUMENT# F19000005614

**Entity Name:** AMERICAN FEDERATION FOR CHILDREN ACTION FUND, INC.**Current Principal Place of Business:**1020 19TH ST STE 675  
WASHINGTON, DC 20036**Current Mailing Address:**1020 19TH ST STE 675  
WASHINGTON, DC 20036 US**FEI Number: 27-1687320****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH ISLAND RD  
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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

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

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

Title DIRECTOR  
Name SHIVERICK, PAUL  
Address 1020 19TH ST STE 675  
City-State-Zip: WASHINGTON DC 20036

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

Title T  
Name LISKER, LISA  
Address 228 S WASHINGTON ST STE 115  
City-State-Zip: ALEXANDRIA VA 22314

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

Title DIRECTOR  
Name DUPLESSIS, ANN  
Address 1020 19TH ST 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: LISA LISKER****TREASURER****01/14/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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

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

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

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