#### 2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002294

Entity Name: GLOBAL IMPACT - INTERNATIONAL CHARITIES, INC.

**FILED** May 01, 2019 **Secretary of State** 6957541350CC

## **Current Principal Place of Business:**

1199 N. FAIRFAX STREET SUITE 300

ALEXANDRIA, VA 22314

### **Current Mailing Address:**

1199 N. FAIRFAX STREET SUITE 300 ALEXANDRIA, VA 22314 US

FEI Number: 52-1273585 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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:

City-State-Zip:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **DIRECTOR** Title **PRESIDENT** 

GRANT. PETER M Name Name JACKSON, SCOTT

Address 1199 N. FAIRFAX STREET Address 1199 N. FAIRFAX STREET

SUITE 300 SUITE 300

ALEXANDRIA VA 22314 ALEXANDRIA VA 22314 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR - CHAIR** 

CRUPI, JOSEPH A POLO, STEVE Name Name

1199 N. FAIRFAX STREET 1199 N. FAIRFAX STREET Address Address

SUITE 300

ALEXANDRIA VA 22314 City-State-Zip: ALEXANDRIA VA 22314 City-State-Zip:

**DIRECTOR - VICE CHAIR** Title Title **DIRECTOR** -

SECRETARY/TREASURER KELLY, NANCY A Name

KANUCH, JAMES B Name

1199 N. FAIRFAX STREET Address Address 1199 N. FAIRFAX STREET

SUITE 300 SUITE 300 City-State-Zip:

ALEXANDRIA VA 22314

City-State-Zip: ALEXANDRIA VA 22314

Title **DIRECTOR** Title **DIRECTOR** 

Name HARRELL, STAN M BLOECHL, TIMOTHY Name

1199 N. FAIRFAX STREET Address 1199 N. FAIRFAX STREET Address SUITE 300

SUITE 300

ALEXANDRIA VA 22314 ALEXANDRIA VA 22314 City-State-Zip:

SUITE 300

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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.

05/01/2019 SIGNATURE: SCOTT JACKSON **PRESIDENT** 

#### Officer/Director Detail Continued:

Title DIRECTOR

Name DIALLO, MOUHAMED M.

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name WU, DAVID

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name ALCORN, JENNIFER

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name COMPTON, KATHRYN

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name BURTON, TRACEY

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR - GENERAL COUNSEL

Name SCHANER, KENNETH I

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name DEGNAN KAMBOU, SARAH

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name ZELLEM, EDWARD CAPTAIN

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR
Name RIEG, CAROL

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name WHITEHEAD, ANITA

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name JAYADEVA, VEENA

Address 1199 N. FAIRFAX STREET

SUITE 300

City-State-Zip: ALEXANDRIA VA 22314