2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000002239

FILED
Apr 30, 2019
Secretary of State
9271474178CC

Entity Name: ASSOCIATION OF SUPERVISION AND CURRICULUM DEVELOPMENT, INC.

Current Principal Place of Business:

1703 N BEAUREGARD STREET
ALEXANDRIA, VA 22311-1714

Current Mailing Address:

1703 N BEAUREGARD STREET
ALEXANDRIA, VA 22311-1714

FEI Number: 52-6078980

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	GRANT, LESLIE
Address	PO BOX 8795
City-State-Zip:	WILLIAMSBURG VA 23187

Title	VP
Name	KAY-WYATT, MELANIE
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	DAVIS, ALINA
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	EPSTEIN, BART
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	SHULDINER, BEN
Address	144 N 9TH #3R
City-State-Zip:	BROOKLYN NY 11249

Title	CFO
Name	RASKIN, NOAH
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	CORMIER-ZENON, DELORES
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	INTERIM EXECUTIVE DIRECTOR, CEO
Name	NOZOE, RONN
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

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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: RONN NOZOE — INTERIM EXECUTIVE DIRECTOR AND CEO — 04/30/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BAPTISTE, KAREN
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	HUSK, SANDY
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	MINGLE, MATTHEW
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	MCCREERY, KATHLEEN
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714

Title	DIRECTOR
Name	LOCKETT, SANDY
Address	1703 N BEAUREGARD STREET
City-State-Zip:	ALEXANDRIA VA 22311-1714