

2023 FOREIGN NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F15000002239

FILED
Oct 10, 2023
Secretary of State
4471704705CR

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

Current Principal Place of Business:

2800 SHIRLINGTON RD
SUITE 1001
ARLINGTON, VA 22206

Current Mailing Address:

2800 SHIRLINGTON RD
SUITE 1001
ARLINGTON, VA 22206 US

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: CHRISTOPHER EMMONS

10/10/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name MCVEY, MICHAEL
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title TREASURER
Name EPSTEIN, BART
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name BROWN, PATRICIA
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title SECRETARY
Name OWOH, JEREMY
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name MENDOZA, SOPHIA
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name KOCH, CHRISTOPHER
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name LOCKETT, PHYLLIS
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name WILLIAMS, AVIS
Address 2800 SHIRLINGTON RD
 SUITE 1001
City-State-Zip: ARLINGTON VA 22206

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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: DARREN BAILEY

AUTHORIZED SIGNOR

10/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name YEBOAH, CHARLES BADU
Address 2800 SHIRLINGTON RD
SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name COLLINS, CATHY
Address 2800 SHIRLINGTON RD
SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title COO
Name BAILEY, DARREN
Address 2800 SHIRLINGTON RD
SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name KOCH, CHRISTOPHER
Address 2800 SHIRLINGTON RD
SUITE 1001
City-State-Zip: ARLINGTON VA 22206

Title DIRECTOR
Name PRICE, NORIS
Address 2800 SHIRLINGTON RD
SUITE 1001
City-State-Zip: ARLINGTON VA 22206