

2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005109

Entity Name: AMERICAN REFUGEE COMMITTEE, A NON-PROFIT CORPORATION**FILED**
Mar 17, 2020
Secretary of State
2264431347CC**Current Principal Place of Business:**615 FIRST AVE NE
SUITE 500
MINNEAPOLIS, MN 55413**Current Mailing Address:**615 FIRST AVE NE
SUITE 500
MINNEAPOLIS, MN 55413**FEI Number: 36-3241033****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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CFO
Name	WHITE, MARK
Address	615 FIRST AVE NE, SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

Title	DIRECTOR
Name	LIBBUS, IMAD
Address	615 FIRST AVE NE SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

Title	DIRECTOR
Name	CAVIN, WILLIAM "DABBS"
Address	615 FIRST AVE NE SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

Title	CHAIRMAN
Name	MORTENSON, MARK
Address	615 FIRST AVE NE SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

Title	PRESIDENT & CEO
Name	WORDSWORTH, DANIEL
Address	615 FIRST AVE NE SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

Title	DIRECTOR
Name	BOYUM, BEN
Address	615 FIRST AVE NE SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

Title	DIRECTOR
Name	SMITH ELLIS, SUSAN
Address	615 FIRST AVE NE SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

Title	DIRECTOR
Name	BREHM, WARD
Address	615 FIRST AVE NE SUITE 500
City-State-Zip:	MINNEAPOLIS MN 55413

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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: MARK WHITE**CFO****03/17/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title TREASURER
Name REED, MAUREEN
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR
Name VOELBEL, RICHARD
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR
Name MACMILLAN, MARTHA "MUFFY"
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR
Name PAGE, GREG
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR
Name WHITNEY, MARY
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR
Name HOLDEN, VANESSA
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR - SECRETARY
Name ROBBINS, HOLLY
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR
Name BENNETT, PAUL
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR
Name THOMAS-GREENFIELD, LINDA
Address 615 FIRST AVE NE
 SUITE 500
City-State-Zip: MINNEAPOLIS MN 55413