2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34755

Entity Name: AMERICAN FOUNDATION FOR THE BLIND, INC.

FILED Jan 02, 2019 **Secretary of State** CC3564338055

Current Principal Place of Business:

1401 SOUTH CLARK ST

SUITE 730

ARLINGTON, VA 22202

Current Mailing Address:

1401 SOUTH CLARK ST

SUITE 730

ARLINGTON, VA 22202 US

FEI Number: 13-5562161 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301 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 **SECRETARY** Title CEO

ADAMS, KIRK Name LEADER, PAT Name

Address 1401 SOUTH CLARK STREET Address 1401 SOUTH CLARK ST

STE 730

STE 730

ARLINGTON VA 22202 City-State-Zip: City-State-Zip: ARLINGTON VA 22202

Title **TREASURER** Title ASST. TREASURER FRANCAVILLA, TED CARVACHE, PATSEY Name Name

1401 SOUTH CLARK STREET 1401 SOUTH CLARK STRETT Address Address

STE 730 STE 730

City-State-Zip: ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE Title **TRUSTEE**

ADAMS, BEN MIGUEL, CHRISTOPHER Name Name

1401 SOUTH CLARK STREET 1401 SOUTH CLARK STREET Address Address

> STE 730 STE 730

City-State-Zip: ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202

Title **TRUSTEE** Title **TRUSTEE**

Name WLODKOWSKI, THOMAS Name WEIDLE, SUSAN

1401 SOUTH CLARK STREET 1401 SOUTH CLARK STREET Address Address

STE 730 STE 730

ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202 City-State-Zip:

Continues on page 2

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.

01/02/2019 SIGNATURE: KIRK ADAMS PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

TRUSTEE Title Title

BARCELO, ELCIO DENNIS, DEBBIE Name Name

Address 1401 SOUTH CLARK STREET Address 1401 SOUTH CLARK STREET

VΡ

STE 730 STE 730

City-State-Zip: ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202

CHEIF CONSULTING-SOLUTIONS OFFICER Title Title **TRUSTEE**

Name BROYLES, CRISTOPHER Name CAMPBELL, CONNIE

Address 1401 SOUTH CLARK STREET Address 1401 SOUTH CLARK STREET

STE 730 **STE 730**

ARLINGTON VA 22202 ARLINGTON VA 22202 City-State-Zip: City-State-Zip:

Title CHIEF PUBLIC AND POLICY RESEARCH Title **TRUSTEE**

Name ENYART, STEPHANIE Name FAZZI, DIANE

1401 SOUTH CLARK STREET Address 1401 SOUTH CLARK STREET Address STE 730 STE 730

City-State-Zip: ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202

TRUSTEE Title **TRUSTEE** Title

Name FREDERICK, KATIE Name HERRLINGER, SARAH

Address 1401 SOUTH CLARK STREET Address 1401 SOUTH CLARK STREET

STE 730 STE 730

City-State-Zip: ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202

ACCOUNTING MANAGER Title TRUSTEE Title MEADOWS, TIMOTHY Name LAVIGNE, MEG Name

1401 SOUTH CLARK STREET 1401 SOUTH CLARK STREET Address Address

> STE 730 **STE 730**

ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202 City-State-Zip:

ASSISTANT SECRETARY Title

1401 SOUTH CLARK STREET **STE 730**

ARLINGTON VA 22202 City-State-Zip:

Name

Address

SHIFLET, SONYA