

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213529682

1.) CORPORATION NAME:

Susan B. Anthony List, Inc.

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MARJORIE DANNENFELSER
1511 N HARRISON ST
ARLINGTON, VA**

SCC ID NO: **04845202**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1707 L STREET NW
STE 550

CITY/ST/ZIP: WASHINGTON, DC 20036

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MARJORIE DANNENFELSER OFFICER DIRECTOR
TITLE: PRESIDENT
ADDRESS: 1511 N HARRISON ST
CITY/ST/ZIP/CO: ARLINGTON, VA 22205

NAME: Robert Kania OFFICER DIRECTOR
TITLE: PRESIDENT
ADDRESS: 1707 L St NW Ste 550
CITY/ST/ZIP/CO: Washington, DC 20036

NAME: JANE ABRAHAM OFFICER DIRECTOR
TITLE: GENERAL CHAIR
ADDRESS: 8016 GREENWICH WOODS CT
CITY/ST/ZIP/CO: MCLEAN, VA 22102

NAME: MARJORIE DANNENFELSER OFFICER DIRECTOR
TITLE: COB
ADDRESS: 1511 N HARRISON STREET
CITY/ST/ZIP/CO: ARLINGTON, VA 22205

NAME: EMILY BUCHANAN OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 1707 L STREET NW
STE 550
CITY/ST/ZIP/CO: WASHINGTON, DC 20036

NAME: Susan Hirschmann OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 1707 L St NW Ste 550
CITY/ST/ZIP/CO: Washington, DC 20036

NAME: Cathleen Ueland TITLE: DIRECTOR ADDRESS: 1707 L St NW Ste 550 CITY/ST/ZIP/CO: Washington, DC 20036	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Bonnie Livingston TITLE: DIRECTOR ADDRESS: 1707 L St NW Ste 550 CITY/ST/ZIP/CO: Washington, DC 20036	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Maura Mudd TITLE: DIRECTOR ADDRESS: 1707 L St NW Ste 550 CITY/ST/ZIP/CO: Washington, DC 20036	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Carol Moore TITLE: DIRECTOR ADDRESS: 1707 L St NW Ste 550 CITY/ST/ZIP/CO: Washington, DC 20036	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Sean Fieler TITLE: DIRECTOR ADDRESS: 1707 L St NW CITY/ST/ZIP/CO: Ste 550 Washington, DC 20036	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ MARJORIE DANNENFELSER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MARJORIE DANNENFELSER, PRESIDENT PRINTED NAME AND CORPORATE TITLE
6/25/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	