**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**Document #: N03000005323**

**Entity Name:** WIKIMEDIA FOUNDATION, INC.

**Current Principal Place of Business:**
1 MONTGOMERY STREET
SUITE 1600
SAN FRANCISCO, CA 94104

**Current Mailing Address:**
1 MONTGOMERY STREET
SUITE 1600
SAN FRANCISCO, CA 94104 US

**FEI Number:** 20-0049703

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>City-State-Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CT CORPORATION SYSTEM</td>
<td>1200 S PINE ISLAND RD</td>
<td>PLANTATION, FL 33324 US</td>
</tr>
</tbody>
</table>

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:**

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**Officer/Director Detail:**

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Address</th>
<th>City-State-Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFO &amp; TREASURER</td>
<td>VILLAGOMEZ, JAIME</td>
<td>1 MONTGOMERY STREET</td>
<td>SAN FRANCISCO CA 94104</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SUITE 1600</td>
<td></td>
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</tbody>
</table>

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<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Address</th>
<th>City-State-Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXECUTIVE DIRECTOR</td>
<td>MAHER, KATHERINE</td>
<td>1 MONTGOMERY STREET</td>
<td>SAN FRANCISCO CA 94104</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SUITE 1600</td>
<td></td>
</tr>
</tbody>
</table>

**Title:** BOARD OF TRUSTEES CHAIR

**Name:** HENNER, CHRISTOPHE

**Address:** 1 MONTGOMERY STREET SUITE 1600

**City-State-Zip:** SAN FRANCISCO CA 94104

**Title:** GENERAL COUNSEL, SECRETARY

**Name:** HERSHENOV, EILEEN

**Address:** 1 MONTGOMERY STREET SUITE 1600

**City-State-Zip:** SAN FRANCISCO CA 94104

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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:** KATHERINE MAHER

**EXECUTIVE DIRECTOR:** 02/11/2019