**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

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

**Current Principal Place of Business:**
149 NEW MONTGOMERY STREET
6TH FLOOR
SAN FRANCISCO, CA 94105

**Current Mailing Address:**
149 NEW MONTGOMERY STREET
6TH FLOOR
SAN FRANCISCO, CA 94105 US

**FEI Number:** 20-0049703

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**
CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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:**

<table>
<thead>
<tr>
<th>Electronic Signature of Registered Agent</th>
<th>Date</th>
</tr>
</thead>
</table>

**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>149 NEW MONTGOMERY STREET</td>
<td>SAN FRANCISCO CA 94105</td>
</tr>
<tr>
<td>BOARD OF TRUSTEES CHAIR</td>
<td>LORENTE, PATRICIO</td>
<td>149 NEW MONTGOMERY STREET</td>
<td></td>
</tr>
<tr>
<td>EXECUTIVE DIRECTOR, INTERIM</td>
<td>MAHER, KATHERINE</td>
<td>149 NEW MONTGOMERY STREET</td>
<td></td>
</tr>
<tr>
<td>GENERAL COUNSEL &amp; SECRETARY</td>
<td>BRIGHAM, GEOFF</td>
<td>149 NEW MONTGOMERY STREET</td>
<td></td>
</tr>
</tbody>
</table>

**SIGNATURE:** JAIME VILLAGOMEZ

**Title:** CFO & TREASURER

**Date:** 04/07/2016

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:** JAIME VILLAGOMEZ

**Title:** CFO & TREASURER

**Date:** 04/07/2016

Electronic Signature of Signing Officer/Director Detail