

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006121

Entity Name: TECHNOLOGY ASSOCIATION OF GRANTMAKERS, INC.

FILED
Apr 20, 2021
Secretary of State
8542866473CC

Current Principal Place of Business:

C/O MR. JORGE MARTINEZ
200 SOUTH BISCAYNE BLVD. #3300
MIAMI, FL 33131-2349

Current Mailing Address:

200 W. MADISON STREET
3RD FLOOR
CHICAGO, IL 60606 US

FEI Number: 56-2558836

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PETREY, RODERICK N
201 SOUTH BISCAYNE BOULEVARD
SUITE 2805
MIAMI, FL 33133 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 VP
Name WALKER, MARK
Address JESSIE BALL DUPONT FUND
40 EAST ADAMS STREET, SUITE 300
City-State-Zip: JACKSONVILLE FL 32202-3302

Title TREASURER
Name ROSENTHAL, ROBERT
Address CARNEGIE CORPORATION OF NY
437 MADISON AVE
City-State-Zip: NEW YORK NY 10022

Title PRESIDENT
Name LODICO, NICOLETTE
Address THE FORD FOUNDATION
1440 BROADWAY
City-State-Zip: NEW YORK NY 10018

Title DIRECTOR
Name WILSON, LEON
Address THE CLEVELAND FOUNDATION
1422 EUCLID AVE #1300
City-State-Zip: CLEVELAND OH 44115

Title DIRECTOR
Name BERG, CHAD
Address BILL & MELINDA GATES FOUNDATION
500 FIFTH AVENUE NORTH
City-State-Zip: SEATTLE WA 98109

Title DIRECTOR
Name ARON-DIAZ, JOSÉ
Address 420 5TH AVE
City-State-Zip: NEW YORK NY 10018

Title SECRETARY
Name PUCKETT, ANN
Address 185 OAKES ST SW
City-State-Zip: GRAND RAPIDS MI 49503

Title DIRECTOR
Name ALIA, NADIA
Address 50 LOCUST AVENUE, SUITE 1
City-State-Zip: NEW CANAAN CT 06840-4737

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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: NICOLETTE LODICO

PRESIDENT

04/20/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SAWANT, NIKHIL
Address 220 N. TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name BONAME, CHARLES
Address 475 W GEORGIA ST SUITE 200
City-State-Zip: VANCOUVER BRITISH COLOMBIA
 V6B 4M9