#### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006121

Entity Name: TECHNOLOGY AFFINITY GROUP, INC.

Jan 21, 2014 Secretary of State CC7870007380

**FILED** 

## **Current Principal Place of Business:**

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

### **Current Mailing Address:**

C/O LISA DILL POOL 23 BRIAR ROAD WAYNE, PA 19087

FEI Number: 56-2558836 Certificate of Status Desired: No

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

Electronic Signature of 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:

Title

City-State-Zip:

Date

Officer/Director Detail:

**DIRECTOR** 

CHARLOTTE NC 28202

Title SECRETARY Title **PRESIDENT** 

Name LOVE, DEMING Name MCDAID, KRISTINE

THE PEW CHARITABLE TRUSTS ROBERT WOOD JOHNSON Address Address

**FOUNDATION** 901 E. STREET, NW

ONE COLLEGE ROAD EAST City-State-Zip: WASHINGTON DC 20004-2008

PRINCETON NJ 08543 City-State-Zip:

Title Т Title DIRECTOR Name SIA, CHRISTOPHER

Name SMITH, REBECCA A Address 630 FIFTH AVENUE

Address 3215 WEST BIG BEAVER ROAD City-State-Zip: NEW YORK NY 10111

City-State-Zip: TROY MI 08084

Title DIRECTOR GOFF, LAURA Name

MOHR, JOHN Name MARIN COMMUNITY FOUNDATION Address MACARTHUR FOUNDATION Address

**5 HAMILTON LANDING SUITE 200** 140 SOUTH DEARBORN ST SUITE

City-State-Zip: NOVATO CA 94949

CHICAGO IL 60603 City-State-Zip: Title DIRECTOR

Name SHARP, MATTHEW **DIRECTOR** Title

**DUKE ENDOWMENT** Address Name BASU, GULI 100 NORTH TRYON STREET SUITE

Address DORIS DUKE CHARITABLE 3500 **FOUNDATION** 

1112 DUKES PARKWAY WEST

HILLSBOROUGH NJ 08844 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.

**TREASURER** 01/21/2014 SIGNATURE: CHRISTOPHER SIA

# Officer/Director Detail Continued:

Title DIRECTOR

Name ELINEWINGA, EDIMA

Address

UNITED NATIONS FOUNDATION 1750 PENNSYLVANIA AVENUE NW SUITE300

City-State-Zip: WASHINGTON DC 20006