

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000001042

Entity Name: LYFT FLORIDA, INC.

Current Principal Place of Business:

185 BERRY STREET
SUITE 400
SAN FRANCISCO, CA 94107

Current Mailing Address:

185 BERRY STREET
SUITE 400
SAN FRANCISCO, CA 94107 US

FEI Number: 20-8809830

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LAWEE, DAVID
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title LEAD INDEPENDENT DIRECTOR
Name AGGARWAL, PRASHANT (SEAN)
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title CHAIR OF THE BOARD
Name GREEN, LOGAN
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title VICE CHAIR
Name ZIMMER, JOHN
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title GENERAL COUNSEL AND
SECRETARY
Name LLEWELLYN, LINDSAY
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title CEO
Name RISHER, JOHN DAVID
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title PRESIDENT
Name SVERCHEK, KRISTIN
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR
Name COHEN, ARIEL
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRISTIN SVERCHEK

PRESIDENT

04/24/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHIEF ACCOUNTING OFFICER
Name BLACKWOOD-KAPRAL, LISA
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR
Name WHITESIDE, JANEY
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR
Name RISHER, JOHN DAVID
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title CFO
Name BREWER, ERIN
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title ASSISTANT SECRETARY
Name CHEN, KEVIN C.
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR
Name STEPHENSON, DAVID
Address 185 BERRY STREET
SUITE 400
City-State-Zip: SAN FRANCISCO CA 94107