## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000003611

**Entity Name: HAMILTON LANE INCORPORATED** 

**Current Principal Place of Business:** 

110 WASHINGTON STREET

**SUITE 1300** 

CONSHOHOCKEN, PA 19428

**Current Mailing Address:** 

110 WASHINGTON STREET

**SUITE 1300** 

CONSHOHOCKEN, PA 19428 US

FEI Number: 26-2482738 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Mar 22, 2023

**Secretary of State** 

0380105390CC

Officer/Director Detail:

Title CHAIRMAN Title DIRECTOR AND CEO
Name ROGERS, HARTLEY Name GIANNINI, MARIO L

Address 110 WASHINGTON STREET Address 110 WASHINGTON STREET

SUITE 1300 SUITE 1300

CONSHOHOCKEN PA 19428 City-State-Zip: CONSHOHOCKEN PA 19428

Title DIRECTOR Title VC

Name SEXTON, O. GRIFFITH Name HIRSCH, ERIK

Address 110 WASHINGTON STREET Address 110 WASHINGTON STREET

SUITE 1300 SUITE 1300

City-State-Zip: CONSHOHOCKEN PA 19428 City-State-Zip: CONSHOHOCKEN PA 19428

Title DIRECTOR Title DIRECTOR

Name VARON, LESLIE F Name BERKMAN, DAVID J

Address 110 WASHINGTON STREET Address 110 WASHINGTON STREET

SUITE 1300 SUITE 1300

City-State-Zip: CONSHOHOCKEN PA 19428 City-State-Zip: CONSHOHOCKEN PA 19428

Title CFO Title SECRETARY, GENERAL COUNSEL

Name VARMA, ATUL Name GAVALIS, LYDIA A

Address 110 WASHINGTON STREET Address 110 WASHINGTON STREET

SUITE 1300 SUITE 1300

City-State-Zip: CONSHOHOCKEN PA 19428 City-State-Zip: CONSHOHOCKEN PA 19428

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

SIGNATURE: VARMA ATUL CFO 03/22/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name GRAVES, R. VANN

110 WASHINGTON STREET SUITE 1300 Address

City-State-Zip: CONSHOHOCKEN PA 19428