

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000000086

Entity Name: CODE FOR AMERICA LABS, INC.**Current Principal Place of Business:**972 MISSION ST FL 5
SAN FRANCISCO, CA 94103**Current Mailing Address:**972 MISSION ST., 5TH FL
SAN FRANCISCO, CA 94103 US**FEI Number:** 27-1067272**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC
7901 4TH ST. N, STE. 300
ST. PETERSBURG, FL 33702 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 PRESIDENT
Name RENTERIA, AMANDA
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title TREASURER
Name BROWN, SHONA
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title VP
Name CORBIN LEWIS, ARLENE
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title VP
Name SCHLENDORF, DAVID
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title SECRETARY
Name CHEN, KATIE
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title VP
Name MOORE, LOU
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title VP
Name TRACY, EMILY
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title VP
Name PATTERSON, TRACEY
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

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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: DAVID SCHLENDORF

VICE PRESIDENT

04/05/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHAIR
Name LILLY, JOHN
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title DIRECTOR
Name O'REILLY, TIM
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title DIRECTOR
Name PAHLKA, JENNIFER
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103

Title DIRECTOR
Name DE LA ROSA, WENDY
Address 972 MISSION ST FL 5
City-State-Zip: SAN FRANCISCO CA 94103