

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001161

Entity Name: SMITH S.H.A.R.E. FOUNDATION, INC.**Current Principal Place of Business:**9016 MOCKINGBIRD DR.
SANIBEL, FL 33957**Current Mailing Address:**9016 MOCKINGBIRD DR.
SANIBEL, FL 33957 US**FEI Number:** 20-2617774**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLORIDA INCORPORATOR
619 CATTLEMEN ROAD
SUITE O11
SARASOTA, FL 34232 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:** MICHAEL ANGELO

01/24/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	SMITH, LEY S
Address	9016 MOCKINGBIRD DR.
City-State-Zip:	SANIBEL FL 33957

Title	S
Name	SMITH, SUSAN E
Address	4920 NORTH INDIAN OAK ST.
City-State-Zip:	BELAIRE KS 67226

Title	DIRECTOR
Name	SMITH, SCOTT A
Address	541 STRATFORD CT.
City-State-Zip:	DEL MAR CA 92014

Title	DIRECTOR
Name	SMITH, STEVEN L
Address	9016 MOCKINGBIRD DR.
City-State-Zip:	SANIBEL FL 33957

Title	DIRECTOR
Name	STARRETT, KRISTEN
Address	18 MEADOWBROOK DR. UNIT 2
City-State-Zip:	BEDFORD NOVA SCOTIA B4A 1P6

Title	DIRECT
Name	SMITH, CARTER
Address	175 HUNTER ST.W APT. 908
City-State-Zip:	HAMILTON ONTARIO L8P 1R4

Title	DIRECTOR
Name	SMITH, KELLY
Address	50 STEPHANIE ST. APT. 201
City-State-Zip:	TORONTO, ONT. M5T 1B3

Title	DIRECTOR
Name	SMITH, SEAN
Address	1175 HARO ST. APT. 21
City-State-Zip:	VANCOUVER B.C. V6E 1E5

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.

SIGNATURE: SUSAN SMITH

DIRECTOR

01/24/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ALDINDIFER, BRYAN
Address 6750 S. POPLAR ST.
City-State-Zip: TEMPE AZ 85283

Title DIRECTOR
Name ALDENDIFER, LAUREN
Address 9016 MOCKINGBIRD DR.
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name SMITH, HAYDN
Address 9016 MOCKINGBIRD DR.
City-State-Zip: SANIBEL FL 33957