

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000001183

**Entity Name:** SMITH GARDNER, INC.

**Current Principal Place of Business:**

14 N. BOYLAN AVENUE  
RALEIGH, NC 27603

**Current Mailing Address:**

14 N. BOYLAN AVENUE  
RALEIGH, NC 27603

**FEI Number:** 56-1734959

**Certificate of Status Desired:** Yes

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

COGENCY GLOBAL INC.  
115 NORTH CALHOUN ST. STE 4  
TALLAHASSEE, FL 32301 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            PRES  
Name            SMITH, STACY APE  
Address        14 N. BOYLAN AVENUE  
City-State-Zip: RALEIGH NC 27603

Title            SECR  
Name            SMYTH, JOAN APG  
Address        14 N. BOYLAN AVENUE  
City-State-Zip: RALEIGH NC 27603

Title            VP  
Name            GARDNER, JOHN MPE  
Address        14 N. BOYLAN AVENUE  
City-State-Zip: RALEIGH NC 27603

Title            TREA  
Name            REVNYAK, JANET F  
Address        14 N. BOYLAN AVENUE  
City-State-Zip: RALEIGH NC 27603

Title            VP  
Name            SCHEER, PIETER KPE  
Address        14 N. BOYLAN AVENUE  
City-State-Zip: RALEIGH NC 27603

Title            DIRE  
Name            POOLE, JIM  
Address        14 N. BOYLAN AVENUE  
City-State-Zip: RALEIGH NC 27603

*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:** JANET F REVNYAK

**TREASURER/BUSINESS    02/02/2022  
MANAGER**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date