## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000000981

Entity Name: THE REDWOODS GROUP, INC.

**Current Principal Place of Business:** 

2801 SLATER ROAD SUITE 220

MORRISVILLE, NC 27560

**Current Mailing Address:** 

2801 SLATER ROAD SUITE 220

MORRISVILLE, NC 27560 US

FEI Number: 56-2087089 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET 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.

Title

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Jan 04, 2019

**Secretary of State** 

CC3218281776

Officer/Director Detail:

Title TREASURER

Name STAINBACK, KRYSTLE

Address 2801 SLATER ROAD, SUITE 220

City-State-Zip: MORRISVILLE NC 27560

Title DIRECTOR, CEO

Name TRAPANI, KEVIN

Address 2801 SLATER RD SUITE 220

City-State-Zip: MORRISVILLE NC 27560

Title DIRECTOR

Name ADEE, MARC J

Address 305 MADISON AVENUE

City-State-Zip: MORRISTOWN NJ 07962

Title DIRECTOR

Name SLIMOWICZ, ANTHONY

Address 2801 SLATER ROAD

SUITE 220

City-State-Zip: MORRISVILLE NC 27560

VP

Name TRAPANI, JENNIFER

Address 2801 SLATER ROAD SUITE 220

City-State-Zip: MORRISVILLE NC 27560

Title SECRETARY

Name KRAUS, JAMES V

Address 305 MADISON AVENUE

City-State-Zip: MORRISTOWN NJ 07962

Title PRESIDENT

Name HEDGES, GARETH

Address 2801 SLATER ROAD

SUITE 220

City-State-Zip: MORRISVILLE NC 27560

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: KRYSTLE STAINBACK

**AUTHORIZED SIGNER** 

01/04/2019

Electronic Signature of Signing Officer/Director Detail

Date