

2022 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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TREASURER
Name	STAINBACK, KRYSTLE
Address	2801 SLATER ROAD, SUITE 220
City-State-Zip:	MORRISVILLE NC 27560

Title	VP
Name	TRAPANI, JENNIFER
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	SECRETARY
Name	KRAUS, JAMES V
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

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**ANNUAL REPORT SIGNER** 03/30/2022_____
Electronic Signature of Signing Officer/Director Detail_____
Date