

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000006443

**Entity Name:** CBeyondData Acquisition Corp

**Current Principal Place of Business:**

251 18TH ST S  
STE 630  
ARLINGTON, VA 22202

**Current Mailing Address:**

251 18TH ST S  
STE 630  
ARLINGTON, VA 22202 US

**FEI Number:** 87-2009399

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DIRECTOR  
Name WOLKING, ERIC  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

Title DIRECTOR  
Name MUTRYN, WILLIAM  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

Title VP  
Name RICHARDS, FRANCIS DYSON  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

Title DIRECTOR  
Name SCHMIDTKNECHT, DAVE  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

Title TREASURER  
Name IVEY, MICHAEL  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

Title SECRETARY  
Name STRANG, WILLIAM  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

Title CHAIRMAN OF THE BOARD  
Name ALLEN, JOHN  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

Title ASSISTANT TREASURER  
Name BECK, ROBERT GRAY  
Address 251 18TH ST S  
STE 630  
City-State-Zip: ARLINGTON VA 22202

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT GRAY BECK

**ASSISTANT TREASURER** 04/11/2024

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            PRESIDENT  
Name            SCHMIDTKNECHT, DAVE  
Address        251 18TH ST S  
                  STE 630  
City-State-Zip: ARLINGTON VA 22202

Title            DIRECTOR  
Name            STRANG, WILLIAM  
Address        251 18TH ST S  
                  STE 630  
City-State-Zip: ARLINGTON VA 22202

Title            DIRECTOR  
Name            ALLEN, JOHN  
Address        251 18TH ST S  
                  STE 630  
City-State-Zip: ARLINGTON VA 22202

Title            DIRECTOR  
Name            IVEY, MICHAEL  
Address        251 18TH ST S  
                  STE 630  
City-State-Zip: ARLINGTON VA 22202