


**2005 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 25, 2005 08:00 AM
Secretary of State

DOCUMENT # F97000001604 1. Entity Name SMITH & NEPHEW, INC.	
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Principal Place of Business 1450 BROOKS RD MEMPHIS, TN 38116	Mailing Address 1450 BROOKS RD MEMPHIS, TN 38116
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DO NOT WRITE IN THIS SPACE



06032005 No Chg-P CR2E034 (10/03)

4. FEI Number 51-0123924	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPS RALSTON, JAMES A 1450 BROOKS RD MEMPHIS, TN 38116
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TAYLOR, JAMES 150 MINUTEMAN ROAD ANDOVER, MA 01810
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ILLINGWORTH, DAVID 1450 BROOKS RD MEMPHIS, TN 38116
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS WATSON, DENNIS 1450 BROOKS RD MEMPHIS, TN 38116
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James A. Ralston 6/3/05 901-396-2121
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #