

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11722

**FILED**  
**Apr 22, 2021**  
**Secretary of State**  
**5278835162CC**

**Entity Name:** A. O. SMITH CORPORATION

**Current Principal Place of Business:**

11270 W PARK PLACE  
SUITE 170  
MILWAUKEE, WI 53224

**Current Mailing Address:**

P.O. BOX 245008, TAX DEPT  
MILWAUKEE, WI 53224-9508 US

**FEI Number:** 39-0619790

**Certificate of Status Desired:** No

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
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 DIRECTOR, CHAIRMAN  
Name RAJENDRA, AJITA G  
Address 11270 W. PARK PLACE  
City-State-Zip: MILWAUKEE WI 53224

Title VPCF  
Name LAUBER, CHARLES T  
Address 11270 W. PARK PLACE  
City-State-Zip: MILWAUKEE WI 53224

Title VPT  
Name ACKERMAN, PATRICIA K  
Address 11270 W.PARK PLACE  
City-State-Zip: MILWAUKEE WI 53224

Title VP  
Name KEMPKEN, DANIEL L  
Address 11270 W. PARK PLACE  
City-State-Zip: MILWAUKEE WI 53224

Title VPCS  
Name STERN, JAMES F  
Address 11270 W. PARK PLACE  
City-State-Zip: MILWAUKEE WI 53224

Title PRESIDENT, CEO  
Name WHEELER, KEVIN J  
Address 11270 W PARK PLACE  
City-State-Zip: MILWAUKEE WI 53224

*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:** PATRICIA K ACKERMAN

**TREASURER**

**04/22/2021**

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

\_\_\_\_\_  
Date