Current Principal Place of Business:	
3641 FACULTY BLVD	
VIRGINIA BEACH, VA 23453	
Current Mailing Address:	

3641 FACULTY BLVD VIRGINIA BEACH, VA 23453 US

Entity Name: OPERATION SMILE, INC.

FEI Number: 54-1460147

DOCUMENT# P39622

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	CHRISTINA HALLAK		03/01/202
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	CEO	Title	PRESIDENT
Name	MAGEE, JR., WILLIAM P	Name	MAGEE, KATHLEEN S
Address	3641 FACULTY BLVD	Address	3641 FACULTY BLVD
City-State-Zip:	VIRGINIA BEACH VA 23453	City-State-Zip:	VIRGINIA BEACH VA 23453
Title	соо	Title	DIRECTOR
Name	SITI, JIM	Name	MAGEE, TODD
Address	3641 FACULTY BLVD	Address	3641 FACULTY BOULEVARD
City-State-Zip:	VIRGINIA BEACH VA 23453	City-State-Zip:	VIRGINIA BEACH VA 23453
Title	DIRECTOR	Title	SENIOR VP MEDICAL AFFAIRS, MEDICAL OVERSIGHT
Name	ANDERSON, CHRISTOPHER	Name	AYALA, RUBEN
Address	3641 FACULTY BOULEVARD	Address	3641 FACULTY BOULEVARD
City-State-Zip:	VIRGINIA BEACH VA 23453	City-State-Zip:	VIRGINIA BEACH VA 23453
Title	CFO	Title	VP, INTERNAL COMMUNICATIONS
Name	ANDERSON, CRAIG D	Name	JARDANHAZY, LISA
Address	3641 FACULTY BLVD	Address	3641 FACULTY BLVD
City-State-Zip:	VIRGINIA BEACH VA 23453	City-State-Zip:	VIRGINIA BEACH VA 23453

Continues on page 2

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

CFO

03/01/2022

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 01, 2022 Secretary of State 0357104908CC

Certificate of Status Desired: Yes

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	BOARD DIRECTOR
Name	BOYD, ROBERT JAMES
Address	3641 FACULTY BLVD
City-State-Zip:	VIRGINIA BEACH VA 23453
Title	BOARD DIRECTOR
Name	RODOSKY, STEVE
Address	3641 FACULTY BLVD
City-State-Zip:	VIRGINIA BEACH VA 23453
Title	BOARD DIRECTOR
Name	POISANT , JAMES
Address	3641 FACULTY BLVD
City-State-Zip:	VIRGINIA BEACH VA 23453

Title	BOARD DIRECTOR
Name	GIOFFRE, DOMINIC MICHAEL
Address	3641 FACULTY BLVD
City-State-Zip:	VIRGINIA BEACH VA 23453
Title	BOARD DIRECTOR
Title Name	BOARD DIRECTOR SMITH, BRUCE