

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000011930

**Entity Name:** KNOW TO GROW, INC.

**Current Principal Place of Business:**

1825 PONCE DE LEON BLVD  
#618  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1825 PONCE DE LEON BLVD.  
#618  
CORAL GABLES, FL 33134

**FEI Number:** 82-3601306

**Certificate of Status Desired:** No

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

BROWN, SHADELL  
1825 PONCE DE LEON BLVD.  
618  
CORAL GABLES, FL 33134 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            PRESIDENT  
Name            BROWN, SHADELL  
Address        1825 PONCE DE LEON BLVD. #618  
City-State-Zip: CORAL GABLES FL 33134

Title            VP  
Name            ALEXANDER, BRACEY  
Address        1825 PONCE DE LEON BLVD. #618  
City-State-Zip: CORAL GABLES FL 33134

Title            SECRETARY  
Name            BROWN, SYLVESTER  
Address        1825 PONCE DE LEON BLVD.  
                  #618  
City-State-Zip: CORAL GABLES FL 33134

*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.*

**SIGNATURE:** SHADELL BROWN

**PRESIDENT**

**02/10/2021**

Electronic Signature of Signing Officer/Director Detail

Date