

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004845

**Entity Name:** ACACIA FINANCIAL GROUP, INC.**Current Principal Place of Business:**6000 MIDLANTIC DRIVE  
SUITE 410 NORTH  
MT. LAUREL, NJ 08054**Current Mailing Address:**6000 MIDLANTIC DRIVE  
SUITE 410 NORTH  
MT. LAUREL, NJ 08054 US**FEI Number: NOT APPLICABLE****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            | WHITE, NOREEN P.             |
| Address         | 26 PARK STREET<br>SUITE 2010 |
| City-State-Zip: | MONTCLAIR NJ 07042           |

|                 |   |
|-----------------|---|
| Title           | DIRECTOR                                |
| Name            | WHELAN, KIM M.                          |
| Address         | 6000 MIDLANTIC DRIVE<br>SUITE 410 NORTH |
| City-State-Zip: | MT. LAUREL NJ 08054                     |

|                 |   |
|-----------------|---|
| Title           | SECRETARY, DIRECTOR                     |
| Name            | NISSEN, PETER D.                        |
| Address         | 6000 MIDLANTIC DRIVE<br>SUITE 410 NORTH |
| City-State-Zip: | MT. LAUREL NJ 08054                     |

|                 |   |
|-----------------|---|
| Title           | TREASURER, DIRECTOR                     |
| Name            | NYIKITA, JOSHUA C.                      |
| Address         | 6000 MIDLANTIC DRIVE<br>SUITE 410 NORTH |
| City-State-Zip: | MT. LAUREL NJ 08054                     |

|                 |   |
|-----------------|---|
| Title           | CO-PRESIDENT                            |
| Name            | WHELAN, KIM M.                          |
| Address         | 6000 MIDLANTIC DRIVE<br>SUITE 410 NORTH |
| City-State-Zip: | MT. LAUREL NJ 08054                     |

*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: KIM M. WHELAN****CO-PRESIDENT****04/02/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date