2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F2000003318

Entity Name: ACORNS GROW INCORPORATED

Current Principal Place of Business:

5300 CALIFORNIA AVE. IRVINE, CA 92617

Current Mailing Address:

5300 CALIFORNIA AVE. IRVINE, CA 92617 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

Certificate of Status Desired: No

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

Officer/Director Detail :

Т	ïtle	DIRECTOR, CEO	Title	SECRETARY	
Ν	lame	KERNER, NOAH	Name	GOOD, ASHLEY	
A	ddress	5300 CALIFORNIA AVE.	Address	5300 CALIFORNIA AVE.	
С	City-State-Zip:	IRVINE CA 92617	City-State-Zip:	IRVINE CA 92617	
т	ītle	DIRECTOR	Title	DIRECTOR	
N	lame	NASH, ADAM	Name	CALLINICOS, BRENT	
A	ddress	5300 CALIFORNIA AVE.	Address	5300 CALIFORNIA AVE.	
С	City-State-Zip:	IRVINE CA 92617	City-State-Zip:	IRVINE CA 92617	
т	itle	DIRECTOR	Title	PRESIDENT	
N	lame	SETTLE, DANA	Name	HIJIRIDA, DAVID	
A	ddress	5300 CALIFORNIA AVE.	Address	5300 CALIFORNIA AVE.	
С	City-State-Zip:	IRVINE CA 92617	City-State-Zip:	IRVINE CA 92617	
т	ītle	DIRECTOR	Title	DIRECTOR	
	lame	SULZBERGER, GABRIELLE	Name	FLYNN, JOHN	
	ddress	5300 CALIFORNIA AVE.	Address	5300 CALIFORNIA AVE.	
	City-State-Zip:	IRVINE CA 92617	City-State-Zip:	IRVINE CA 92617	

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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: ASHLEY GOOD

SECRETARY

03/05/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 05, 2023 Secretary of State 0954602020CC

Date

Officer/Director Detail Continued :

Title	DIRECTOR		
Name	BRAINCH, SATPAL		
Address	5300 CALIFORNIA AVE.		
City-State-Zip:	IRVINE CA 92617		