

**2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02016

**Entity Name:** TTX COMPANY/ACORN DIVISION**Current Principal Place of Business:**2151 HAWKINS ST  
CHARLOTTE, NC 28203**Current Mailing Address:**2151 HAWKINS ST  
CHARLOTTE, NC 28203 US**FEI Number:** 23-1554199**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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 HAMANN, JENNIFER  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title PRESIDENT / CEO  
Name WELLS, THOMAS  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title CONTROLLER  
Name GRISAMORE, KEVIN  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title DIRECTOR  
Name FORAN, MICHAEL  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title DIRECTOR  
Name MARQUEZ ABREU, JORGE  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title ASSISTANT TREASURER  
Name PRZYBYLSKI, ROBERT  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title DIRECTOR  
Name ELKINS, CLAUDE E.  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title DIRECTOR  
Name WHITEHEAD, PATRICK  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

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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:** SHANNON BAGATO**SECRETARY****03/28/2025**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP, CHIEF INFORMATION OFFICER  
Name SCHINELLI, BRUCE G.  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title SECRETARY  
Name BAGATO, SHANNON  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title DIRECTOR  
Name WILLIAMS, THOMAS  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title TREASURER / CFO  
Name SCHANZLIN, TODD B.  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title VP, CHIEF HUMAN RESOURCES  
OFFICER  
Name POWERS, BRIAN R.  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title VP  
Name BAGATO, SHANNON  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203

Title EXECUTIVE VICE PRESIDENT  
Name THOMAS, MARTY  
Address 2151 HAWKINS ST  
City-State-Zip: CHARLOTTE NC 28203