

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

DOCUMENT# N01515

**Entity Name:** UNITY-CLEARWATER, INC.

**Current Principal Place of Business:**

% LEDDY ELAINE HAMMOCK  
2465 NURSERY ROAD  
CLEARWATER, FL 33764

**Current Mailing Address:**

% LEDDY ELAINE HAMMOCK  
2465 NURSERY ROAD  
CLEARWATER, FL 33764 US

**FEI Number:** 59-1058242

**Certificate of Status Desired:** No

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

HAMMOCK, LEDDY ELAINE  
2465 NURSERY RD.  
CLEARWATER, FL 33764 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 OFFICER  
Name HAVILAND, MARY  
Address 1852 WELLAND DR.  
City-State-Zip: CLEARWATER FL 33756

Title OFFICER  
Name FRISCH, DEBBIE  
Address 2541 NEWBERN AVE  
City-State-Zip: CLEARWATER FL 33761

Title OFFICER  
Name MARINACCI, ED  
Address 1143 THAYER ST  
City-State-Zip: SAFETY HARBOR FL 34695

Title SENIOR MINISTER  
Name HAMMOCK, LEDDY E  
Address % LEDDY ELAINE HAMMOCK  
2465 NURSERY ROAD  
City-State-Zip: CLEARWATER FL 33764

Title OFFICER  
Name ALVAREZ, SYLVIA  
Address 9215 N. FLORIDA AVE STE101  
City-State-Zip: TAMPA FL 33612

Title OFFICER  
Name LARKIN, DEB  
Address 2465 NURSERY RD.  
City-State-Zip: CLEARWATER FL 33764

Title OFFICER  
Name SIMON, DON  
Address 2465 NURSERY RD  
City-State-Zip: CLEARWATER FL 33764

*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:** UNITY CLEARWATER INC LEDDY HAMMOCK

SENIOR MINISTER

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date