

File 0000002840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

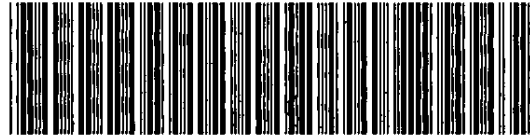
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600286369386

06/20/16--01032--016 **70.00

FILED
16 JUN 20 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 23 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations
CHANCELLOR FINANCIAL INCORPORATED

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
DANIEL CHANCELLOR

Name of Person
CHANCELLOR FINANCIAL INCORPORATED

Firm/Company
333 COLONY BLVD #325

Address
THE VILLAGES, FL 32162

City/State and Zip code
amanda@sterlingcpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda S. John	812	254-1138
_____	at (_____)	_____
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

CHANCELLOR FINANCIAL INCORPORATED
3000 DIVISION STREET
EVANSVILLE, IN 47711

June 3, 2016

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Application for Authority

To Whom It May Concern:

I have enclosed the following documents requesting foreign authority for my corporation to transact business in Florida:

1. Cover letter;
2. Application by Foreign Corporation for Authorization to Transact Business in Florida;
3. Certificate of Good Standing from the Secretary of State of Indiana; and
4. Check No. 1448 in the amount of Seventy (\$70.00) Dollars.

Please review the enclosed documents carefully, after you have done so, it would be greatly appreciated if you would file said documents. When the documents have been filed and made a part of the Division of Corporate Records, please return a copy of them to our office. I have enclosed an envelope for your convenience.

Thank you for your assistance in this matter. Should you have any questions, please contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Dan Chancellor", written over a horizontal line.

Daniel Chancellor
President

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

Chancellor Financial Incorporated

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Indiana 20-3401810

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
07/19/2005

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

3000 Division Street, Evansville, IN 47711

7. _____
#325 (Principal office address)

333 Colony Blvd., The Villages, FL 32162

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Daniel Chancellor

Name:

333 Colony Drive #325

Office Address:

The Villages

32162

(City)

, Florida (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
16 JUN 20 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Daniel Chancellor

Address: 333 Colony Blvd #325 The Villages, FL 32162

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Daniel Chancellor

Address: 333 Colony Blvd #325 The Villages, FL 32162

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Daniel Chancellor, President

(Typed or printed name and capacity of person signing application)

FILED
JUL 20 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

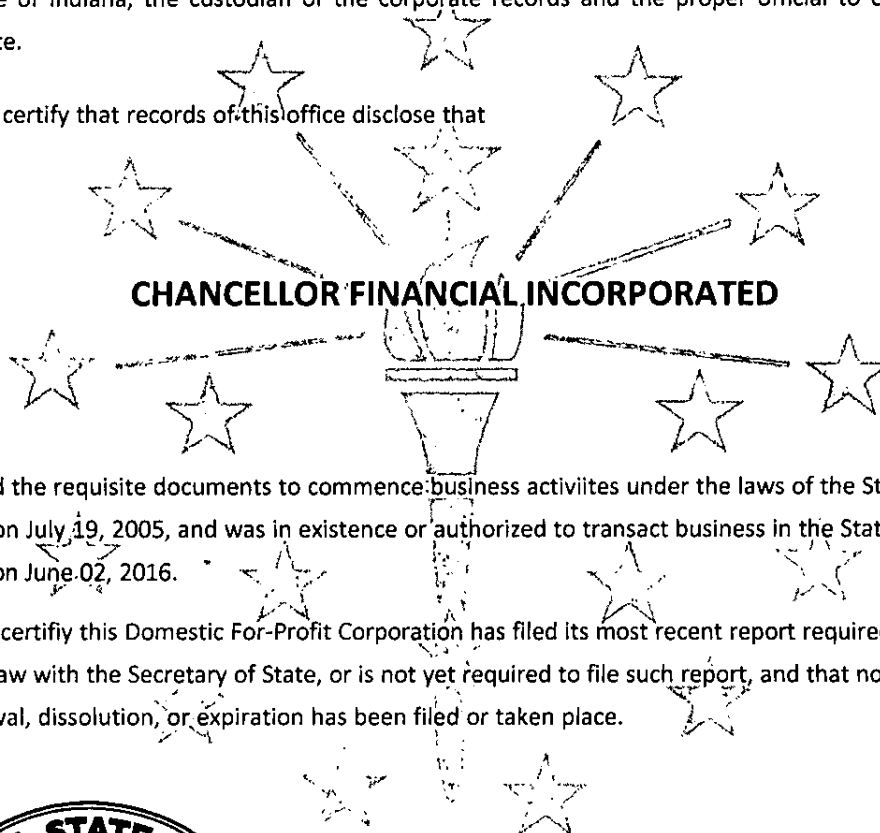
**State of Indiana
Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that



duly filed the requisite documents to commence business activities under the laws of the State of Indiana on July 19, 2005, and was in existence or authorized to transact business in the State of Indiana on June 02, 2016.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, June 02, 2016

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

2005072000734 / 201628878

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>