

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N93000005473

1. Entity Name
FROM UNITY TO LOYALTY INC.



Principal Place of Business
**6934 RICHARDSON ROAD
JACKSONVILLE, FL 32209 US**

Mailing Address
**6934 RICHARDSON ROAD
JACKSONVILLE, FL 32209 US**



03202008 No Chg-NP CR2E037 (4/08)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NEAL, ANDRE X
3221 CLYDE DRIVE
JACKSONVILLE, FL 32208**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000874136
04/10/08-80104-025 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VC
EVANS, JAMES JR.
6934 RICHARDSON ROAD
JACKSONVILLE, FL 32209**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
NEAL, ANDR'E X
3221 CLYDE DRIVE
JACKSONVILLE, FL 32208**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
FLOWERS, ROBERT L
6720 WEST VIRGINIA COURT
JACKSONVILLE, FL 32208**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: André X Neal, André X Neal
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/08
Date

904-768-2778
Daytime Phone #