

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000062556 (3)**

1. Corporation Name

UNITY FINANCIAL CORPORATION



Principal Place of Business

**1019 REID STREET
PALATKA FL 32177**

Mailing Address

**1019 REID STREET
PALATKA FL 32177**

3. Date Incorporated or Qualified

08/25/1994

3a. Date of Last Report

09/22/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3271677

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

23

City & State

28

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

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

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CHRONISTER, CHARLES R
ROUTE 5 BOX 1780
PALATKA FL 32177**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name, Title, and Address)

Signature of Registered Agent (Print Name, Title, and Address)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PSTD
CHRONISTER, CHARLES R
ROUTE 5 BOX 1780
PALATKA FL 32177**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D
KRISER, RYAN J
114 THICKET LANE
PALATKA FL 32177**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Charles R Chronister

CHARLES R CHRONISTER

5/1/96

904-325-1000

CR2E034 (12/95)