

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01774

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: PURITY FINANCIAL CORP.

## Current Principal Place of Business:

525 VINE STREET  
CINCINNATI, OH 45202 US

## New Principal Place of Business:

## Current Mailing Address:

525 VINE STREET  
CINCINNATI, OH 45202 US

## New Mailing Address:

FEI Number: 59-3084815

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WATSON, JOHN BERT  
774 S.R. 13  
SUITE 11  
MANDARIN, FL 32259 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: SCHEPER, CHARLES R P/D  
Address: 525 VINE STREET  
City-St-Zip: CINCINNATI, OH 45202 US

Title: D ( ) Delete  
Name: ELLIS, WILLIAM C D  
Address: 525 VINE STREET  
City-St-Zip: CINCINNATI, OH 45202 US

Title: V/S ( ) Delete  
Name: MUETHING, MARK F V/S  
Address: 250 EAST 5TH STREET  
City-St-Zip: CINCINNATI, OH 45202 US

Title: AT ( ) Delete  
Name: MISCHELL, THOMAS E AT  
Address: ONE EAST 4TH ST, 8TH FLOOR  
City-St-Zip: CINCINNATI, OH 45202 US

Title: T ( ) Delete  
Name: MAGOTEAUX, RICHARD L T  
Address: 250 EAST 5TH STREET  
City-St-Zip: CINCINNATI, OH 45202

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: MAGOTEAUX, RICHARD L T  
Address: 250 EAST 5TH STREET  
City-St-Zip: CINCINNATI, OH 45202 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: THOMAS E MISCHELL

AT

04/15/2009

Electronic Signature of Signing Officer or Director

Date