

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000065635

FILED
Dec 02, 2009
Secretary of State

Entity Name: U. N. I. REALTY & INVESTMENTS CORPORATION

Current Principal Place of Business:

13408 SE 100TH AVE
BELLEVIEW, FL 34420

New Principal Place of Business:

6705 NW 118TH ST. RD.
REDDICK, FL 32686

Current Mailing Address:

PO BOX 578
BELLEVIEW, FL 34421

New Mailing Address:

6705 NW 118TH ST. RD.
REDDICK, FL 32686

FEI Number: 56-2582319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINE, DONNA M
13408 SE 100TH AVE
BELLEVIEW, FL 34420 US

Name and Address of New Registered Agent:

CLINE, D
6705 NW 118TH STREET RD.
REDDICK, FL 32686 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: D. CLINE

12/02/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CLINE, DONNA M
Address: 13408 SE 100TH AVE
City-St-Zip: BELLEVIEW, FL 34420

Title: P () Delete
Name: CLINE, CONNA M
Address: 13408 SE 100TH AVE
City-St-Zip: BELLEVIEW, FL 34420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CLINE, D
Address: 6705 NW 118TH ST. RD.
City-St-Zip: REDDICK, FL 32686

Title: P (X) Change () Addition
Name: CLINE, D
Address: 6705 NW 118TH ST. RD,
City-St-Zip: REDDICK, FL 32686

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: D. CLINE

PRES

12/02/2009

Electronic Signature of Signing Officer or Director

Date