

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000003672

Entity Name: U-N-I INC**Current Principal Place of Business:**1012 ROBSON AVENUE
SEFFNER, FL 33584**Current Mailing Address:**1012 ROBSON AVENUE
SEFFNER, FL 33584**FEI Number:** 85-1668083**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MOSLEY, PATRICIA A
1013 W. DR. MARTIN LUTHER KING JR. DRIVE
SEFFNER, FL 33584 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	MOSLEY, PATRICIA A
Address	1013 W DR MARTIN LUTHER KING JR. DRIVE
City-State-Zip:	SEFFNER FL 33584

Title	SEC
Name	MACK, SABRINA
Address	3704 W LAKE DRIVE
City-State-Zip:	SEFFNER FL 33584

Title	OFF
Name	WARMACK, RONNIE
Address	5033 1/2 NORTH PINE STREET
City-State-Zip:	SEFFNER FL 33584

Title	VP
Name	MACK, RICHARD
Address	3704 W LAKE DRIVE
City-State-Zip:	SEFFNER FL 33584

Title	TREA
Name	JACKSON, GREGORY
Address	10462 BLOOMFIELD HILLS DRIVE
City-State-Zip:	SEFFNER FL 33584

Title	OFF
Name	RICHARDSON, SELENA
Address	3101 GORDON COURT
City-State-Zip:	TAMPA FL 33619

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA MOSLEY**PRESIDENT****03/13/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date