

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000003540

Entity Name: OLI-II, INC.

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

758 B ST  
SPRINGFIELD, OR 97477

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1481  
SPRINGFIELD, OR 97477

**New Mailing Address:**

FEI Number: 93-1184476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NOVACK, THOMAS  
922 26TH ST W  
BRADENTON, FL 32405 US

**Name and Address of New Registered Agent:**

NOVACK, THOMAS  
2663 CRYSTAL LAKE ACRES DRIVE  
LAKELAND, FL 33801 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: THOMAS NOVACK

04/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PCH  
Name: NOVACK, THOMAS  
Address: 3700 BABCOCK LN SPACE # 36  
City-St-Zip: EUGENE, OR 97401

Title: VP  
Name: NOVACK, WILLIAM  
Address: 1187 N HINTERLAND CT  
City-St-Zip: MONTICELLO, IN 47960

Title: SD  
Name: NOVACK, TINA  
Address: 3700 BABCOCK LN SPACE # 36  
City-St-Zip: EUGENE, OR 97401

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

SIGNATURE: THOMAS NOVACK

PRES

04/04/2012

Electronic Signature of Signing Officer or Director

Date