2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: OLEAN MEDICAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

21178 OLEAN BLVD.
UNIT A
PORT CHARLOTTE, FL 33952

Current Mailing Address:

10561 SIX MILE CYPRESS PKWY
SUITE A
FORT MYERS, FL 33966 US

FEI Number: 59-2073165

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CZYZ, CRAIG N
10561 SIX MILE CYPRESS PKWY
SUITE A
FORT MYERS, FL 33966 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	PRESIDENT	Title	SECRETARY, TREASURER
Name	CZYZ, CRAIG DR.	Name	CZYZ, ELEONORE
Address	10561 SIX MILE CYPRESS PKWY SUITE A	Address	10561 SIX MILE CYPRESS PKWY SUITE A
City-State-Zip:	FORT MYERS FL 33966	City-State-Zip:	FORT MYERS FL 33966

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: CRAIG CZYZ PRESIDENT 01/06/2017

Electronic Signature of Signing Officer/Director Detail — Date