

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750463

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
Name CZYZ, CRAIG DR.
Address 10561 SIX MILE CYPRESS PKWY
 SUITE A
City-State-Zip: FORT MYERS FL 33966

Title VP
Name CZYZ, ELEONORE
Address 10561 SIX MILE CYPRESS PKWY
 SUITE A
City-State-Zip: FORT MYERS FL 33966

Title SECRETARY
Name AZIMA, ALI
Address 10561 SIX MILE CYPRESS PKWY
 SUITE A
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

01/11/2018

Electronic Signature of Signing Officer/Director Detail

Date