

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000001436

Entity Name: OLI-4, INC.**Current Principal Place of Business:**1355 E. MAIN STREET
LAKELAND, FL 33801**Current Mailing Address:**PO BOX 2487
EATON PARK, FL 33840 US**FEI Number:** 93-1280660**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NOVACK, THOMAS E.
1355 E. MAIN STREET
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 E. NOVACK

04/27/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR, CEO
Name NOVACK, THOMAS E
Address 1355 E. MAIN STREET
City-State-Zip: LAKELAND FL 33801

Title DIRECTOR
Name NOVACK, WILLIAM J
Address 1187 HINTERLAND CT
City-State-Zip: MONTICELLO IN 47960

Title VP, DIRECTOR, SECRETARY
Name NOVACK, TINA A
Address 1355 E. MAIN STREET
City-State-Zip: LAKELAND FL 33801

Title DIRECTOR
Name NOVACK, MARY ANN
Address 1187 HINTERLAND CT
City-State-Zip: MONTICELLO IN 47960

Title TREASURER
Name FLORY, LIZA D
Address 1355 E. MAIN STREET
City-State-Zip: LAKELAND FL 33801

Title ASST. TREASURER
Name TROWBRIDGE, REBECCA J
Address 631 COLONIAL DRIVE
City-State-Zip: SPRINGFIELD OR 97477

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 E. NOVACK

PRESIDENT

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date