

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008748

Entity Name: OS COMPLEX, INC.**Current Principal Place of Business:**901 HIGHLAND AVE
ORLANDO, FL 32803**Current Mailing Address:**901 HIGHLAND AVE
ORLANDO, FL 32803 US**FEI Number:** 26-3416614**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARTLETT, JAMES W.
901 HIGHLAND AVE
ORLANDO, FL 32803 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:** JAMES W. BARTLETT

02/19/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name JABLONSKI, DAVID H DR.
Address 901 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

Title VC
Name DEERY, J. J.
Address 901 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

Title TREASURER
Name BLOMELEY, STEVE L.
Address 901 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

Title D
Name WHITEHURST, JAY E.
Address 901 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name NICHOLSON, DENISE DR.
Address 901 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

Title SECRETARY
Name RAMSBY, GREG
Address 901 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name OVERMEYER, SARAH
Address 901 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

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: DAVID JABLONSKI

CHAIRMAN

02/19/2019

Electronic Signature of Signing Officer/Director Detail

Date