

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003267

Entity Name: WINTER PARK MEDICAL OFFICE BUILDING I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1919 N ORANGE AVE
ORLANDO, FL 32804

Current Mailing Address:

1919 N ORANGE AVE
ORLANDO, FL 32804

FEI Number: 45-2228478

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAIR, ANDREW
200 NORTH LAKEMONT AVE
WINTER PARK, FL 32792 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: ANDREW BAIR

02/10/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DST
Name BAIR, ANDREW
Address 200 NORTH LAKEMONT AVE
City-State-Zip: WINTER PARK FL 32792

Title PRESIDENT, DIRECTOR
Name WANDERSLEBEN, JENNIFER
Address 201 N. PARK AVENUE
City-State-Zip: APOPKA FL 32703

Title DVP
Name BAYLOR, JEFFREY E MD
Address 133 BENMORE DRIVE
SUITE 100
City-State-Zip: WINTER PARK FL 32792

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: JENNIFER WANDERSLEBEN

PRESIDENT

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date