

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006772

Entity Name: OAK STREET MEDICAL BUILDING LC

Current Principal Place of Business:

1061 HOLMESDALE ROAD
JACKSONVILLE, FL 32207

Current Mailing Address:

1061 HOLMESDALE ROAD
JACKSONVILLE, FL 32207

FEI Number: 59-3730159

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HEEKIN, CLAIRE B
1061 HOLMESDALE ROAD
JACKSONVILLE, FL 32207 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

Authorized Person(s) Detail :

Title MGRM
Name HEEKIN, CLAIRE B
Address 1061 HOLMESDALE ROAD
City-State-Zip: JACKSONVILLE FL 32207

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLAIRE B HEEKIN

MGR MBR

01/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date