

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007328

FILED  
Aug 30, 2012  
Secretary of State

Entity Name: THE OASIS PLAN, INC.

**Current Principal Place of Business:**

3404 N. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

3404 N. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32804

**New Mailing Address:**

FEI Number: 77-0693439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOVE, SUE E  
1103 DORIS STREET  
ALTAMONTE SPRINGS, FL 32714 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOVE, SUE E  
Address: 1103 DORIS STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP  
Name: TAYLOR, DEBREITA D  
Address: 606 CAMDEN ROAD  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S/T  
Name: NICKELSON, VICKI A  
Address: 1849 CROW HILL BLVD.  
City-St-Zip: ORLANDO, FL 32828

Title: T  
Name: TILLMAN, LARRY L  
Address: 4866 S. SEMORAN BLVD. UNIT # 1802  
City-St-Zip: ORLANDO,, FL 32822

Title: T  
Name: OGLESBY, LORNA F  
Address: 640-F MUSCOVY CIRCLE  
City-St-Zip: DELAND, FL 32720

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: DEBREITA D TAYLOR

VP

08/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date