

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001737

Entity Name: OASIS OF PEACE, INC.**Current Principal Place of Business:**2445 E CAPARINA DR.
SAINT AUGUSTINE, FL 32092**Current Mailing Address:**PO BOX 350982
JACKSONVILLE, FL 32235**FEI Number:** 05-0556412**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GERRY, BROWN L
2669 LANTANA LAKES DR E
JACKSONVILLE, FL 32246 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**Officer/Director Detail :**

Title	CD
Name	FELICIANO, VALERIANA REV.
Address	PO BOX 350982
City-State-Zip:	JACKSONVILLE FL 32235

Title	DT
Name	BROWN, GERRY
Address	PO BOX 350982
City-State-Zip:	JACKSONVILLE FL 32235

Title	REVEREND
Name	SPENCER, ROSILYN
Address	PO BOX 350982
City-State-Zip:	JACKSONVILLE FL 32235

Title	OTHER
Name	FELICIANO, JAIME JR.
Address	PO BOX 350982
City-State-Zip:	JACKSONVILLE FL 32235

Title	ASST. SECRETARY
Name	COUTU, JESSICA
Address	PO BOX 350982
City-State-Zip:	JACKSONVILLE FL 32235

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: VALERIANA FELICIANO

CHAIR

03/24/2015

Electronic Signature of Signing Officer/Director Detail_____
Date