

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000080308

**Entity Name:** VILLA OASIS, LLC

**Current Principal Place of Business:**

2807 FORREST CLUB DRIVE  
PLANT CITY, FL 33566

**Current Mailing Address:**

2807 FORREST CLUB DRIVE  
PLANT CITY, FL 33566 US

**FEI Number:** 35-2561717

**Certificate of Status Desired:** No

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

FISHERS, KATE CPA  
1400 W. FAIRBANKS AVENUE  
SUITE 201  
WINTER PARK, FL 32789 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 MGR,P,S  
Name PENA-GALVIS, CLAUDIA P  
Address 2807 FORREST CLUB DRIVE  
City-State-Zip: PLANT CITY FL 33566

Title T  
Name WHITAKER, ERIC O'KELLEY  
Address 2807 FORREST CLUB DRIVE  
City-State-Zip: PLANT CITY FL 33566

Title VP  
Name PRADA-PENA, MARIA JULIANA  
Address 2807 FORREST CLUB DRIVE  
City-State-Zip: PLANT CITY FL 33566

*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:** CLAUDIA PENA-GALVIS

**PRESIDENT**

**03/08/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date