	2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT
--	--

DOCUMENT# L17000157323

Entity Name: THE OASIS AT CROSSTOWN, LLC

### **Current Principal Place of Business:**

247 N. WESTMONTE DR ALTAMONTE SPRINGS, FL 32714

# **Current Mailing Address:**

247 N. WESTMONTE DR ALTAMONTE SPRINGS, FL 32714 US

# FEI Number: 37-1872000

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

#### Certificate of Status Desired: No

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

#### Authorized Person(s) Detail :

Title	MANAGER	Title	VP
Name	DRPRMP MANAGER, LLC	Name	HALEY, RICHARD
Address	247 N. WESTMONTE DR	Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	VP	Title	PRESIDENT
Name	WERNECKE, EDWARD	Name	PICERNE, DAVID
Name	WERNEORE, EDWARD	Hamo	
Address	247 N. WESTMONTE DR	Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	VP		
The	VF		
Name	CUMMINGS, JEFF		
Address	247 N. WESTMONTE DR		
City-State-Zip:	ALTAMONTE SPRINGS FL 32714		

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: DRPRMP MANAGER, LLC

MANAGER

01/18/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Jan 18, 2022 Secretary of State 5211105842CC

Date