

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000135384

**Entity Name:** OASIS LIFESTYLE COMMUNITIES LLC

**Current Principal Place of Business:**

1334 N.E. 151 STREET  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

8452 LONG ACRE DRIVE  
MIRAMAR, FL 33025 US

**FEI Number:** 86-3673357

**Certificate of Status Desired:** No

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

OASIS OPTIMUM CARE LLC  
8452 LONG ACRE DR  
MIRAMAR, FL 33025 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	CEO	Title	MANAGER
Name	WILLIAMS, MARJORIE	Name	WILLIS, JAMI EDWINA
Address	8452 LONG ACRE DR	Address	8452 LONG ACRE DRIVE
City-State-Zip:	MIRAMAR FL 33025	City-State-Zip:	MIRAMAR FL 33025

*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:** MARJORIE WILLIAMS

CEO

02/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date