2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749094

FILED Apr 14, 2009 Secretary of State

Entity Name: OASIS MANAGEMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business:

3511 S. PENINSULA DRIVE 100 BOYNTON BLVD

DAYTONA BEACH, FL 32127 DAYTONA BEACH SHORES, FL 32118 US US

Current Mailing Address: New Mailing Address:

3511 S. PENINSULA DRIVE DAYTONA BEACH, FL 32127

FEI Number: 59-2011909 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PARKES, KAREN 3511 S. PENINSULA DRIVE SOUTHEAST MANAGEMENT SERVICES, INC DAYTONA BEACH, FL 32127 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:

Date

Electronic Signature of Registered Agent

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SHARBER, AL TRICIA, IOZZI Name: Name: 5625 SOUTHERN PKWY. Address: 1120 WOODLAND DR Address:

City-St-Zip: LOUISVILLE, KY 40214 City-St-Zip: BADEN, PA 15005

Title: Title: PRES (X) Change () Addition () Delete KISTLER, DON Name: KISTLER, DON Name:

Address: 99 NARROWS RD Address: 99 NARROWS RD City-St-Zip: WESTMINSTER, MA 01473 City-St-Zip: WESTMINSTER, MA 01473

Title: Title: SECT (X) Change () Addition () Delete SHARRER, AL BETTY, DAVISON Name: Name:

5625 SOUTHERN PKWY 5285 RICHLAND RD Address: Address: City-St-Zip: LOUISVILLE, KY 40214 City-St-Zip: GIBSONIA, PA 15044

() Delete Title: DT Title: (X) Change () Addition

Name: BILL, EMILY Name: BULL, EMILY Address: 6 BOYNTON BLVD. Address: 6 BOYNTON BLVD.

City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32119

Title: () Delete Title: () Change (X) Addition

DONNA, GIZENSKI Name: Name: PO BOX 1 Address: Address:

City-St-Zip: City-St-Zip: CURTISVILLE, PA 15032

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BETTY DAVISON SECT 04/14/2009