

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000084934

FILED
Apr 16, 2007
Secretary of State

Entity Name: TROPICAL OASIS "LLC"

Current Principal Place of Business:

4314 W BARCELONA ST.
TAMPA, FL 33629 US

New Principal Place of Business:

Current Mailing Address:

4314 W BARCELONA ST.
TAMPA, FL 33629 US

New Mailing Address:

PO BOX 18969
TAMPA, FL 33679 US

FEI Number: 20-3531676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, BRIAN T
4314 W BARCELONA ST.
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SANCHEZ, BRIAN T
Address: 4314 W BARCELONA ST.
City-St-Zip: TAMPA, FL 33629 US

Title: S () Delete
Name: WILLIAMS, MARY D
Address: 4314 W BARCELONA ST
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: BRIAN T SANCHEZ

MGR

04/16/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date