

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000057722

FILED  
Apr 16, 2012  
Secretary of State

Entity Name: OASIS AT HOME, LLC

**Current Principal Place of Business:**

4010 SE 145TH STREET  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

3706 SE HWY 484  
BELLEVIEW, FL 34420

**Current Mailing Address:**

4010 SE 145TH STREET  
SUMMERFIELD, FL 34491

**New Mailing Address:**

FEI Number: 80-0728217      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

JOHNSON, SHARON D  
4010 SE 145TH STREET  
SUMMERFIELD, FL 34491      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  
Name: JOHNSON, SHARON D  
Address: 4010 SE 145TH STREET  
City-St-Zip: SUMMERFIELD, FL 34491

Title: MGRM  
Name: JOHNSON, TYRONE G  
Address: 4010 SE 145TH STREET  
City-St-Zip: SUMMERFIELD, FL 34491

Title: MGRM  
Name: JOHNSON, BRITTANY E  
Address: 4010 SE 145TH STREET  
City-St-Zip: SUMMERFIELD, FL 34491

I hereby 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: SHARON D. JOHNSON

RA

04/16/2012

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