

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006049

Entity Name: OASIS OUTREACH, INC.

FILED  
May 03, 2007  
Secretary of State

## Current Principal Place of Business:

731W BRANDON BLVD  
BRANDON, FL 33511

## New Principal Place of Business:

409 SABLE POINTE AVE  
SEFFNER, FL 33584

## Current Mailing Address:

PO BOX 2013  
SEFFNER, FL 335832013

## New Mailing Address:

FEI Number: 59-3668874      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

GOODMAN, MARK B  
731W BRANDON BLVD  
BRANDON, FL 33511      US

## Name and Address of New Registered Agent:

GOODMAN, MARK B  
409 SABLE POINTE AVE  
SEFFNER, FL 33584      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: MARK B GOODMAN

05/03/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: GOODMAN, MARK B  
Address: 409 SABLE POINTE AVE  
City-St-Zip: SEFFNER, FL 33584

Title: OAD      ( ) Delete  
Name: GOODMAN, IAN P  
Address: PO BOX 6572  
City-St-Zip: LAKELAND, FL 33807

Title: OAD      ( ) Delete  
Name: GOODMAN, SUSAN E  
Address: 409 SABLE POINTE AVE  
City-St-Zip: SEFFNER, FL 33584

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD      (X) Change ( ) Addition  
Name: GOODMAN, MARK B  
Address: PO BOX 2013  
City-St-Zip: SEFFNER, FL 33583

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

Title: OAD      (X) Change ( ) Addition  
Name: GOODMAN, SUSAN E  
Address: PO BOX 2013  
City-St-Zip: SEFFNER, FL 33583

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: MARK B GOODMAN

PD

05/03/2007

Electronic Signature of Signing Officer or Director

Date