

N04000006423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

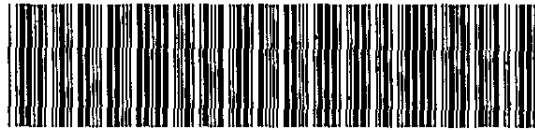
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100038250711

06/28/04--01030--008 \*\*78.75

04 JUN 29 PM 1:46  
RECEIVED  
DIVISION

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: THE OASIS CERTIFICATE AND COMPETENCY BOARD, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: GENE TISCHER  
Name (Printed or typed)

4208 CHARING CROSS ROAD  
Address

SARASOTA, FL 34241  
City, State & Zip

941-371-2243  
Daytime Telephone number

GENE TISCHER  
4208 CHARING CROSS ROAD  
SARASOTA, FL 34241

NOTE: Please provide the original and one copy of the articles.

SECRET  
DIVISION  
04 JUN 28 PM 1:46

## **Articles of Incorporation**

In Compliance with Chapter 617, F.S., (Not for Profit)

### **ARTICLE I ☐ NAME**

The name of the corporation shall be: The OASIS Certificate and Competency Board, Inc. (hereinafter "OCCB").

### **ARTICLE II ☐ PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be: 233-A East Main Street, New Iberia, Louisiana 70562

### **ARTICLE III ☐ PURPOSE**

The purposes for which this corporation is organized are to:

1. Encourage and promote reliability in OASIS data, through consistent application of guidelines provided by the Centers for Medicare & Medicaid Services (CMS); and
2. Provide a means for home health providers, or individuals interested in using OASIS data for research, to demonstrate and establish their expertise and commitment to OASIS data accuracy.

### **ARTICLE IV ☐ MEMBERSHIP**

**Section 1 ☐ Members** There are three members in OCCB:

1. Associated Home Health Industries of Florida, Inc.
2. Home Care Association of Louisiana, Inc.
3. Home Therapy Services, Inc.

#### **Section 2 ☐ Transferability of Membership**

Membership is only transferable with the consent of the other two members.

#### **Section 3 ☐ Liability of Members**

In accordance with non-profit corporation laws, no member of OCCB shall be personally liable for any debts or obligations of OCCB by virtue of their being members of OCCB.

### **ARTICLE V ☐ MANNER OF ELECTION OF THE BOARD OF DIRECTORS**

Directors are appointed for two (2) year terms by the Members and may be reappointed by the Members.

### **ARTICLE VI ☐ INITIAL BOARD OF DIRECTORS**

The three members of the initial Board of Directors are:

1. Warren Hebert; 233-A East Main Street, New Iberia, Louisiana 70562
2. Linda Krulish; PO Box 2768, Redmond, Washington 98073
3. Gene Tischer; 4208 Charing Cross Road, Sarasota, FL 34241-6119

### **ARTICLE VII ☐ INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the registered agent is:

Gene Tischer, Esq. 4208 Charing Cross Road, Sarasota, FL 34241-6119.

04 JUN 28 PM 1:46

SECTION 617  
DIVISION OF CORPORATIONS  
TOLSON

**ARTICLE VIII ☐ INCORPORATOR**


The name and Florida street address of the registered agent is:

Gene Tischer; 4208 Charing Cross Road, Sarasota, FL 34241-6119.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

  
\_\_\_\_\_  
Signature/Registered Agent

6/25/04  
Date

  
\_\_\_\_\_  
Signature/Incorporator

6/25/04  
Date

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 JUN 28 PM 1:46