

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011472

FILED
Feb 01, 2009
Secretary of State

Entity Name: OASIS OF LOVE MINISTRIES INC.

Current Principal Place of Business:

902 SE 10TH TERRACE
GAINESVILLE, FL 326018100 US

New Principal Place of Business:

Current Mailing Address:

902 SE 10TH TERRACE
GAINESVILLE, FL 326018100 US

New Mailing Address:

FEI Number: 20-3743553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADLEY, WINSTON J
6215 NW 56TH LN
GAINESVILLE, FL 326533118 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

OFFICERS AND DIRECTORS:

Title: PDSP () Delete
Name: BRADLEY, WINSTON J
Address: 902 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 326018100 US

Title: TD () Delete
Name: CAMPBELL, KENDALL M
Address: 902 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 326018100 US

Title: VD () Delete
Name: CLARK, CLAYTON J II
Address: 902 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 326018100 US

Title: SD () Delete
Name: BRADLEY, SANDRA P
Address: 902 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 326018100 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: SD (X) Change () Addition
Name: CAMPBELL, KALI-NICOLE H
Address: 902 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 326018100 US

Title: MEMB () Change (X) Addition
Name: BRADLEY, SANDRA P
Address: 902 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 326018100 US

Title: MEMB () Change (X) Addition
Name: BRADLEY, GREGORY
Address: 902 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 326018100 US

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: KALI-NICOLE H. CAMPBELL

SD

02/01/2009

Electronic Signature of Signing Officer or Director

Date