

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012533

FILED
Apr 25, 2008
Secretary of State

Entity Name: THE OASIS FAMILY CHURCH OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

116 WILSHIRE BLVD
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

116 WILSHIRE BLVD
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 20-3803318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, FREDERICK H ESQ
THE LAW OFFICES OF FREDERICK H. NELSON, PA
234 N WESTMONTE DR - STE 3000
ALTAMONTE SPRINGS, FL 32714 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: PD () Delete
Name: PHILIPS, JEFF
Address: 116 WILSHIRE BLVD.
City-St-Zip: CASSELBERRY, FL 32707

Title: TD () Delete
Name: HARMAN, JIM
Address: 116 WILSHIRE BLVD.
City-St-Zip: CASSELBERRY, FL 32707

Title: VPD () Delete
Name: FOSTER, ERIK
Address: 116 WILSHIRE BLVD.
City-St-Zip: CASSELBERRY, FL 32707

Title: VPD () Delete
Name: RUTH, ROD
Address: 116 WILSHIRE BLVD.
City-St-Zip: CASSELBERRY, FL 32707

Title: SD () Delete
Name: RUTH, THERESA
Address: 116 WILSHIRE BLVD.
City-St-Zip: CASSELBERRY, FL 32707

Title: VPD () Delete
Name: GOLAY, TOM
Address: 116 WILSHIRE BLVD.
City-St-Zip: CASSELBERRY, FL 32707

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

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 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: JEFFREY JOSEPH PHILIPS

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date