

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007089

FILED
Sep 04, 2008
Secretary of State

Entity Name: OASIS MIDDLE SCHOOL, INC.

Current Principal Place of Business:

202 13TH AVENUE EAST
BRADENTON, FL 34208

New Principal Place of Business:

Current Mailing Address:

4729 HARVEST BEND
SARASOTA, FL 34235

New Mailing Address:

FEI Number: 20-5148564 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

BAILEY, EDNA F
4729 HARVEST BEND
SARASOTA, FL 34235 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: MF () Delete
Name: BAILEY, EDNA F
Address: 4729 HARVEST BEND
City-St-Zip: SARASOTA, FL 34235

Title: PM () Delete
Name: O'BRIEN, MARTIN F
Address: 2912 EAST MARK DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: MITCHELL, GLORIA
Address: 1100 15TH ST EAST
City-St-Zip: BRADENTON, FL 34208

Title: T () Delete
Name: WILLIAMS, CHARLES
Address: 4305 17TH ST EAST
City-St-Zip: ELLENTON, FL 34222

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:

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: EDNA BAILEY

D

09/04/2008

Electronic Signature of Signing Officer or Director

Date