2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2012
Secretary of State

DOCUMENT# N07000008326

Entity Name: OASIS OF LOVE RESTORATION CENTER, INC.

Current Principal Place of Business:

4142 MARINER BLVD.
SUITE 430
SPRING HILL, FL 34609 US

New Principal Place of Business:

Current Mailing Address:

4142 MARINER BLVD.
SUITE 430
SPRING HILL, FL 34609 US

New Mailing Address:

FEI Number: 26-0628624 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOURK, BETTY C
12617 GREEN OAK LANE
DADE CITY, FL 33525 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: DIR
Name: WILDE, ROBERT
Address: 116 CHESAPEAK AVENUE
City-St-Zip: TAMPA, FL 33606

Title: DIR
Name: SOURK, BETTY C
Address: 12617 GREEN OAK LANE
City-St-Zip: DADE CITY, FL 33525

Title: P
Name: CIGANEK, MARY ELLEN DR
Address: 3217 MARINER BLVD.
City-St-Zip: SPRING HILL, FL 34609 US

Title: DIR
Name: COLANGELO, JERRY
Address: 70 EAST COUNTRY CLUB DRIVE
City-St-Zip: PHOENIX, AZ 85014

I hereby 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 all other like empowered.

SIGNATURE: MARY ELLEN CIGANEK P 04/18/2012

Electronic Signature of Signing Officer or Director Date