2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
May 27, 2008 8:00 am
Secretary of State
04-28-2008 90329 040 ****61.25

DOCUMENT # N45433

1. Entity Name
(OASIS) OKALOOSA AIDS SUPPORT AND INFORMATIONAL SERVICES, INC.

66012190

Principal Place of Business	Mailing Address
745 NW BEAL PKWY SUITE 10 FORT WALTON BEACH, FL 3254-7666 US	P.O. BOX 35 FT. WALTON BEACH, FL 32549-7035

01042008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3089946 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FOUST, DANNY 3890 TOMLANE DR PENSACOLA, FL 32504	Name: Wendy Zegel Street Address (P.O. Box Number is Not Acceptable): 102 Nicole Ln. City: Crestview FL Zip Code: 32539

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Wendy Zegel DATE: Apr 28, 08
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ~~FOUST, DANNY~~ 3890 TOMLANE DR PENSACOLA, FL 32504	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V EAGEL, WENDY 102 NICOLAS LANE CRESTVIEW, FL 32537	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP President Zegel, Wendy	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CORL, JEFF 675 SCENIC GULF DRIVE, UNIT 504D MIRAMAR BEACH, FL 32550	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PAYNE, CHRIS 333 HOLLYWOOD BLVD FORT WALTON BEACH, FL 32549	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP Vice President Jackie Knight 4230 Bob Sikes Rd. DeFuniak Springs, FL 32434	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jackie Knight Jackie Knight Apr 24, 08 850-314-0953
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #