

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000709

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** OASIS LAKES RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12400 INTERNATIONAL DR.  
ORLANDO, FL 32821

**New Principal Place of Business:**

**Current Mailing Address:**

7037 CROSSLAND DRIVE  
ORLANDO, FL 32821

**New Mailing Address:**

4960 CONFERENCE WAY NORTH, STE. 100  
BOCA RATON, FL 33431

**FEI Number:** 59-3510757

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: FITZGERALD, DENNIS  
Address: 4960 CONFERENCE WAY N.100  
City-St-Zip: BOCA RATON, FL 33431

Title: STD ( ) Delete  
Name: BASYE, LEON  
Address: 4960 CONFERENCE WAY N.100  
City-St-Zip: BOCA RATON, FL 33431

Title: VD ( ) Delete  
Name: THAKURDIN, JEREMY  
Address: 8219 VIA VERONA  
City-St-Zip: ORLANDO, FL 32836

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: BLEVINS, ANGELA  
Address: 3500 DEPAUW BLVD., STE. 2039  
City-St-Zip: INDIANAPOLIS, IN 46268

Title: VP/D (X) Change ( ) Addition  
Name: LEE, RALPH  
Address: 1535 BROAD CROSSING ROAD  
City-St-Zip: CHARLOTTESVILLE, VA 22911

Title: ST/D (X) Change ( ) Addition  
Name: HELLER, REGINA  
Address: 6435 CASTLEWAY WEST DRIVE, STE. 200  
City-St-Zip: INDIANAPOLIS, IN 46250

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: ANGELA BLEVINS

P/D

04/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date