

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003456

FILED
Apr 23, 2009
Secretary of State

Entity Name: IGLESIA OASIS DE JESUS INC.

Current Principal Place of Business:

4712 SE 15TH AVE
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

1109 SE 15 STREET
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 65-0933069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MANZANO, HECTOR J
1109 SE 15TH ST
CAPE CORAL, FL 33990 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: TD () Delete
Name: MANZANO, HECTOR
Address: 1109 SE 15TH ST.
City-St-Zip: CAPE CORAL, FL 33990

Title: PD () Delete
Name: MANZANO, ALICIA
Address: 1109 SE 15TH ST.
City-St-Zip: CAPE CORAL, FL 33990

Title: VD () Delete
Name: ALE, OMAR
Address: 1106 SE 15TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: SD () Delete
Name: ALE, SANDI
Address: 1106 SE 15TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: ASD () Delete
Name: MALDONADO, PLACIDA
Address: 2113 SW 28TH LANE
City-St-Zip: CAPE CORAL, FL 33914

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:

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: HECTOR MANZANO

TD

04/23/2009

Electronic Signature of Signing Officer or Director

Date