

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134064

FILED
Apr 30, 2007
Secretary of State

Entity Name: OASIS MANAGEMENT & CONSULTING GROUP, INC.

Current Principal Place of Business:

5217 SW 79TH TERRACE
GAINESVILLE, FL 32608

New Principal Place of Business:

6531 CEDAR CHASE WAY
TALLAHASSEE, FL 32311

Current Mailing Address:

5217 SW 79TH TERRACE
GAINESVILLE, FL 32608

New Mailing Address:

6531 CEDAR CHASE WAY
TALLAHASSEE, FL 32311

FEI Number: 59-3753482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST, PATRICIA R
5217 SW 79TH TERRACE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

WEST, PATRICIA R
6531 CEDAR CHASE WAY
TALLAHASSEE, FL 32311 US

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

04/30/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WEST, PATRICIA R
Address: 5217 SW 79TH TERRACE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WEST, PATRICIA R
Address: 6531 CEDAR CHASE WAY
City-St-Zip: TALLAHASSEE, FL 32311

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA R. WEST

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date