

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000095326

FILED
Jul 15, 2009
Secretary of State

Entity Name: OASIS MORTGAGE FUNDING CORP.

Current Principal Place of Business:

3602 BROADWAY
SUITE 2
FORT MYERS, FL 33901 US

New Principal Place of Business:

5113 AVENIDA DEL TURA
NORTH FORT MYERS, FL 33903 US

Current Mailing Address:

2710 DEL PRADO BLVD
#324
CAPE CORAL, FL 33904 US

New Mailing Address:

5113 AVENIDA DEL TURA
NORTH FORT MYERS, FL 33903 US

FEI Number: 20-0108432 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HILTBOLD, LINDA J
5113 AVENIDA DEL TURA
NORTH FORT MYERS, FL 33903 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HILTBOLD, LINDA J
Address: 5113 AVENIDA DEL TURA
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: LINDA J HILTBOLD

P

07/15/2009

Electronic Signature of Signing Officer or Director

_____ Date