

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000135143

Entity Name: OASIS OF GLADES, INC.

FILED  
Mar 10, 2009  
Secretary of State

## Current Principal Place of Business:

3167 SHELL LANE  
LABELLE, FL 33935

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 2156  
LABELLE, FL 33975

## New Mailing Address:

FEI Number: 65-0859291

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MEREDITH, SR, WILLIAM J  
3167 SHELL LANE  
LABELLE, FL 33935 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MEREDITH, PATRICIA G  
Address: 3167 SHELL LANE  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: MEREDITH, JR, WILLIAM J  
Address: 1353 N W 1ST ST  
City-St-Zip: PLANTATION, FL 33325

Title: D ( ) Delete  
Name: MEREDITH, DEAN J  
Address: 10656 DENOEU RD  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: MEREDITH, THEODORE I  
Address: 22434 BOYLE LANE  
City-St-Zip: PALO CEDRO, CA 96073

Title: D ( ) Delete  
Name: MEREDITH, DAVIS M  
Address: 10506 N W 66 ST  
City-St-Zip: PARKLAND, FL 33076

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

SIGNATURE: WILLIAM J MEREDITH SR

PRES

03/10/2009

Electronic Signature of Signing Officer or Director

Date