

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **p98000085965**

Entity Name

GRAND OASIS, INC. ✓

**FILED**  
**Jun 05, 2000 8:00 am**  
**Secretary of State**

06-05-2000 90015 036 \*\*\*150.00

Principal Place of Business  
1101 Delk Road  
Longwood, FL 32779

Mailing Address  
1101 Delk Road  
Longwood, FL 32779

Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Tampa, FL

3. Mailing Address  
Lynn Cole, Receiver  
Suite, Apt. #, etc.  
201 N. Franklin St. STE 2556

Zip  
Country  
33602 USA

DO NOT WRITE IN THIS SPACE

4. FEI Number  
59-3535587

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
Ferd B. Sebastian, III  
1101 Delk Rd.  
Longwood, FL 32779

7. Name and Address of New Registered Agent  
Name  
Lynn Cole, Receiver for Grand Oasis, Inc.  
Street Address (P.O. Box Number is Not Acceptable)  
201 N. Franklin St., Ste. 2556  
One Tampa City Center Bldg.  
City  
Tampa FL Zip Code  
33602

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, typed or printed name of registered agent and title if applicable. **Lynn Cole, Receiver for Grand Oasis, Inc** April 27, 2000  
(NOTE: Registered Agent signature required when re-nesting) DATE

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
PTD Ferd B. Sebastian, III 1101 Delk Rd. Longwood, FL 32779	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Lynn Cole, Receiver <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition One Tampa City Center Bldg. 201 N. Franklin St., Ste. 2556 Tampa, FL 33602
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S Jan L. Sebastian 1101 Delk Rd. Longwood, FL 32779	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Lynn Cole** Lynn Cole, Receiver for Grand 4/27/00 (813) 223-700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
Oasis

CR2E034 (9/99)