

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771274

FILED
Mar 28, 2012
Secretary of State

Entity Name: OAKBROOK CENTER FOR SPIRITUAL LIVING, INC.

Current Principal Place of Business:

1009 N.E. 28TH AVENUE
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

1009 N.E. 28TH AVENUE
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 59-2414466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOSTETLER, MARGARET C REV
1009 N.E. 28TH AVE.
OCALA, FL 34470 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: PR
Name: GRIMES, CYNTHIA
Address: 405 SE 51 AVE
City-St-Zip: Ocala, FL 34471

Title: VP
Name: ANDERSON, NORMA
Address: 5355 5E 32 PL
City-St-Zip: Ocala, FL 34480

Title: TREA
Name: GREEN, KENNETH JR
Address: 800 NE 50 AVE
City-St-Zip: Ocala, FL 34470

Title: S
Name: ALLEN, ERIC
Address: 7 SAPHIRE WAY
City-St-Zip: Ocala, FL 34472

Title: MEM
Name: PIPER, DELITE
Address: PO BOX 357579
City-St-Zip: Ocala, FL 32635

Title: MEM
Name: WOODS, VICTORIA
Address: 3733 NE 19 AVE
City-St-Zip: Ocala, FL 34479

I hereby 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 all other like empowered.

SIGNATURE: REV. MARGARET C HOSTETLER

MIN

03/28/2012

Electronic Signature of Signing Officer or Director

Date