2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2013
Secretary of State
CC9187265631

DOCUMENT# 726999

Entity Name: SEBRING "MEALS ON WHEELS", INC.

Current Principal Place of Business:

700 S PINE ST.
SEBRING, FL 33870

Current Mailing Address:

P.O. BOX 169
SEBRING, FL 33871

FEI Number: 59-1463626

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLIFFORD, ABLES III M
551 S COMMERCE AVE
SEBRING, FL 33870 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 — Date

Officer/Director Detail :

Title	PRES
Name	FERNSLER, EUGENE
Address	129 SPARROW AVENUE
City-State-Zip:	SEBRING FL 33872

Title	TRES
Name	STAIK, PAUL T
Address	409 GRAND PRIX DRIVE
City-State-Zip:	SEBRING FL 33872

Title	DIR
Name	CRORKEN, ANDREW
Address	3024 OAKHILL DRIVE
City-State-Zip:	AVON PARK FL 33825

Title	DIRECTOR
Name	FREELAND, ROBERT
Address	4109 MULLIGAN COURT WEST
City-State-Zip:	SEBRING FL 33872

Title	V P
Name	MERCER, JULIA B
Address	3806 HUBBEL AVENUE
City-State-Zip:	SEBRING FL 33875

Title	SEC
Name	DIXON, ED
Address	108 LAKESIDE ROAD
City-State-Zip:	SEBRING FL 33870

Title	DIR
Name	DIONNE, JOSEPH
Address	217 RAIL AVENUE
City-State-Zip:	SEBRING FL 33870

Title	DIRECTOR
Name	LAYNE, RON
Address	201 COMMERCIAL COURT
City-State-Zip:	SEBRING FL 33876

Continues on page 2

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: PAUL STAIK TREASURER 02/17/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	OSWALD, BEN
Address	3127 HOLIDAY BEACH DRIVE
City-State-Zip:	AVON PARK FL 33825