

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50978

FILED
May 15, 2013
Secretary of State
CC8055697120

Entity Name: THE LORD'S TABLE OF INDIAN RIVER COUNTY INC.

Current Principal Place of Business:

10074 ESPERANZA CIRCLE
FELLSMERE, FL 32948

Current Mailing Address:

PO BOX 780686
SEBASTIAN, FL 32978

FEI Number: 59-3146002

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOWERS, CAMILLE E T
1611 CORAL REEF ST
SEBASTIAN, FL 32958 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: CAMILLE E. BOWERS

05/15/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name DEMARTINO, CHARLES
Address 1969 E. LAKEVIEW DR.
City-State-Zip: SEBASTIAN FL 32958

Title DV
Name ROTH, JOAN
Address 1984 LAKEVIEW DR.
City-State-Zip: SEBASTIAN FL 32958

Title D
Name MACDONALD, JOANNE
Address 791 ROSELAND RD
City-State-Zip: SEBASTIAN FL 32958

Title SD
Name MEREDITH, MCELROY
Address 1968 E. LAKEVIEW DR.
City-State-Zip: SEBASTIAN FL 32958

Title DIRECTOR
Name SEIFERT, KEN
Address 75 JOY HAVEN DR.
City-State-Zip: SEBASTIAN FL 32958

Title D
Name STEINMETZ, SUZANNE
Address 45 RIVER OAK DR.
City-State-Zip: SEBASTIAN FL 32958

Title TREASURE
Name BOWERS, CAMILLE
Address 1611 CORAL REEF ST
City-State-Zip: SEBASTIAN FL 32958

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: CAMILLE E BOWERS

TREASURER

05/15/2013

Electronic Signature of Signing Officer/Director Detail

Date