

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006284

FILED
Apr 23, 2009
Secretary of State

Entity Name: SUR LA TABLE, INC.

Current Principal Place of Business:

5701 6TH AVE. S, SUITE 486
SEATTLE, WA 981082514

New Principal Place of Business:

Current Mailing Address:

5701 6TH AVE. S, SUITE 486
SEATTLE, WA 981082514

New Mailing Address:

FEI Number: 91-1643409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: CEOD () Delete
Name: TIERNEY, KATHLEEN C
Address: 5701 6TH AVE. S, SUITE 486
City-St-Zip: SEATTLE, WA 981082514

Title: S () Delete
Name: BROWNFIELD, DEBBIE
Address: 5701 6TH AVE. S, SUITE 486
City-St-Zip: SEATTLE, WA 981082514

Title: C () Delete
Name: BEHNKE, CARL G
Address: 520 PIKE STREET SUITE 262
City-St-Zip: SEATTLE, WA 98101

Title: P () Delete
Name: SCHWEFEL, JACK
Address: 5701 6TH AVE S SUITE 486
City-St-Zip: SEATTLE, WA 98108

Title: D () Delete
Name: BEHNKE, JOHN
Address: 520 PIKE STREET SUITE 262
City-St-Zip: SEATTLE, WA 98101

Title: D () Delete
Name: RULLMAN, CHARLES P
Address: 11100 SANTA MONICA BLD SUITE 1900
City-St-Zip: LOS ANGELES, CA 90025

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
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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: DEBBIE BROWNFIELD

CFO

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date