

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009550

FILED
Apr 15, 2009
Secretary of State

Entity Name: MEALS ON WHEELS OF LAKE PLACID, INC.

Current Principal Place of Business:

118 LEMON ROAD, N.W.
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

P.O.BOX1304
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 02-0786187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, ANDREW B ATTY
150 NORTH COMMERCE AVENUE
SEBRING, FL 338703201 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: DP () Delete
Name: BROWNING, JIM
Address: 118 LEMON ROAD, N.W.
City-St-Zip: LAKE PLACID, FL 33852

Title: DS () Delete
Name: SAUVE, JEAN
Address: 401 CATFISH CREEK RD
City-St-Zip: LAKE PLACID, FL 33852

Title: DVP () Delete
Name: STICKLE, SALLY
Address: 3299 PLACIF VIEW DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: DT () Delete
Name: TRUMBLE, RICHARD
Address: 138 LOQUAT ROAD, NE
City-St-Zip: LAKE PLACID, FL 33852

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
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN SAUVE

SEC

04/15/2009

Electronic Signature of Signing Officer or Director

Date