2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30047

200	1 UNIFORM BUS	INESS F	EPOR	T (UBR)	Sai	FIL:) am	
DOCU	MENT # N30047					p 14, 200 ecretary	of Sta	te	
_	ATHER'S TABLE, INC.			(t		09-14-2001 90032			
Principal Plac	ce of Business	Mailing Addres	ss —	-					
MT ZION AME CHURCH 4221 28TH AVE VERO BEACH FL 32967 US		4221 28TH AVENUE P.O. BOX 6114 VERO BEACH FL 32961			1 (188)((18)	- • 1814 1881 1881 1881 1881 1881 1881	*, 1011 31313 41311 4131 41	FOII OI OI I I ROI	
2. Principal F	Place of Business	3. Mailing Address		<u>-</u> .					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & Star	te	City & State			4. FEI Number	4. FEI Number 65-0203644 Applied For Not Applied For			
Zip -	Country	Zip - 1	7 00 .	Country	5. Certificate of S	Status Desired	\$8.75 Add	ditional	
	6. Name and Address of Current	Registered Agent		Name	7. Name and Ad	dress of New Registe	red Agent		
LUNDY, RALPH . 4546 381H AVE				Street Address (P.O. Box Number is Not Acceptable)					
	ACH FL 32967	29		City	City FL Zip Code				
	Signature, typed or printed name of registered agent of the second secon	9. El	(NOTE: Reg ection Campai ust Fund Contr	· · ·	\$5.00 May Be Added to Fees	Make Ch	neck Payable ment of State		
10.	OFFICERS AND DIF			11.		GES TO OFFICERS AND			
ITLE IAME STREET ADDRESS	JOHNSON, BERNICE B 4275 38TH AVE VERO BEACH FL 32967	□ c	elete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANC	GES TO OFFICERS AND	Change	Addition	
ITLE IAME TREET ADDRESS_ ITY-ST-ZIP	VD Harris, Arthur -1850 38th PL Vero Beach FL		· .	TITLE NAME STREET ADDRESS CITY-ST-ZIP		A This seems	Change	Addition	
ITLE Ame Treet address ITY-ST-ZIP	STD CHEW, CLAUDE C 236 14TH AVENUE VERO BEACH FL			TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
ITLE Ame Treet address ITY-ST-ZIP	D PERSON, SYLVIA 5855 59TH COURT VERO BEACH FL 32967			TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
ITLE Ame Treet address ITY-ST-ZIP	D Butler, Wilmore 4315B 28th Avenue Vero Beach Fl	□ 0		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TLE AME		□ o	•	TITLE NAME	,		☐ Change	☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

7/10/01 /321)562 5275